PHA 5-Year and	U.S. Department of Housing and Urban	OMB No. 2577-0226
	Development	Expires 4/30/2011
Annual Plan	Office of Public and Indian Housing	

1.0	PHA Information PHA Name: Kingsport Housing & Redevelopment Authority PHA Code: TN006 PHA Type: □ Small □ High Performing □ Standard □ HCV (Section 8)						
	PHA Fiscal Year Beginning: (MM/YYYY): <u>04/2011</u>						
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: 438 Number of HCV units: 1,242						
3.0	Submission Type ⊠ 5-Year and Annual Plan						
4.0	PHA Consortia P	HA Consortia	: (Check box if submitting a joi	nt Plan and complete table be	elow.)		
	Participating PHAs PHA Program(s) Included in the Programs Not in the Program No. of Units in Each Program						
		Code	Consortia	Consortia	PH	HCV	
	PHA 1:						
	PHA 2:						
	PHA 3:						
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.						
5.1	Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: We affirm that shelter is a basic human necessity and we are dedicated to provide decent housing opportunities to those in need in the Greater Kingsport Area. We believe that blighted areas undermine the vibrancy of our community and therefore we are committed to acting as a catalyst for successful redevelopment efforts in the community.						

Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.

Expand the supply of assisted housing

Apply for additional rental vouchers: There has been only one program where there was a notice of funding availability (NOFA); the Family Unification Program. We applied and were not awarded any new vouchers under this program in 2010. We have reapplied in late 2010. We have continued to apply for additional Shelter Plus Care and Supportive Housing Vouchers with Appalachian Regional Coalition for Homelessness (ARCH). We are working on a new initiative with Interfaith Hospitality Network in providing assistance to Homeless Families.

Reduce public housing vacancies: Public housing vacancies have been reduced during the year. KHRA's public housing vacancies have been consistently below 3%. The economy is a primary reason for this as we have experienced fewer turnovers.

Leverage private or other public funds to create additional housing opportunities: KHRA continues to work on the implementation of the HOPE VI program. This involves the construction of thirty-eight (38) new rental units through mixed finance; twenty-four (24) homeownership units which have all been sold and 54 Section 8 Project Based rental units for seniors. Youth Build has completed and sold six (6) homes and has two (2) additional homes under construction.

Acquire or build units or developments: We continue to work with GKAD to build seven (7) additional homeownership units on Sherwood Road

Work with TSWAHC and statewide agencies in their efforts to create affordable assisted living facilities: We are working with TARHA and other PHAs and legislators to find a develop alternatives to allow seniors to live independently longer.

Work with Continuum of Care ARCH and other service providers to apply for Shelter Plus Care, HOPWA and Supportive Housing, HPRP: KHRA is working through ARCH and the providers network to ensure housing for the chronically homeless and persons with AIDS.

Improve the Quality of assisted housing

Improve public housing management: KHRA has implemented Asset Based Management and a new computer system. **Improve voucher management:** KHRA has averaged 1167 vouchers under lease monthly which utilizes 100% of HAP funds available. We are also working to complete implementation of a new computer system including the hand held inspection software.

Increase customer satisfaction: The increase in customer satisfaction is demonstrated by the greater demand for KHRA's services. Public housing occupancy is at or above 97% and the demand for HCV is in very high demand with a waiting list of over 2000. The homeownership program has exceeded 24 sales this year.

Concentrate on efforts to improve specific management functions: Asset Based Management: Asset Based Management staff has participated in computer based and web training on Asset Based Management.

Renovate or modernize public housing units: HOPE VI, CFP, Redevelopment: Major Capital Fund Program projects included; windows replaced in Dogwood Terrace, roofs replaced in Holly Hills, Cloud and Lee Apartments had roof replaced. We have started HVAC replacements in Cloud.

Demolish or dispose of obsolete public housing: HOPE VI or a relevant HUD Program Started the planning process for Revitalization of Lee Apartments which will include the demolishing of Lee Apartments probably in 2012 or 2013.

Provide replacement public housing: KHRA implemented the HOPE VI grant funded in October 2006. This includes fifty-four (54) rental units for seniors, thirty-eight (38) rental units for families and twenty-four (24) homeownership units.

Provide replacement vouchers: Relocation vouchers were provided to all persons displaced by the demolition of TN 6-2/3.

Participation in Continuum of Care (ARCH): KHRA is a partner with ARCH. Through Continuum of Care grants, under Shelter Plus care and Supportive Housing, KHRA is assisting 160 chronically homeless households and expect to increase that number in the future.

Increase assisted housing choices

Provide voucher mobility counseling: KHRA regularly assists families in porting away from, or into, our service area.

Conduct outreach efforts to potential voucher landlords: Landlord meetings are held in groups or with individuals. We currently have around 500 landlords participating.

Increase voucher payment standards: Voucher payments are at the maximum allowed. This permits more housing choices for clients and also assists program participants in pursuing homeownership.

Implement voucher homeownership program: KHRA has participated in use of HCV to assist clients in purchasing homes. We have over 36 successful homeowners since starting the homeownership program.

Implement public housing or other homeownership programs: KHRA has implemented a public housing homeownership program. We have had many twenty-four (24) public housing residents achieve homeownership through Habitat for Humanity, KHRA or a conventional developer.

Project basing of tenant based vouchers: KHRA has project based ninety-nine (99) units of special needs housing. KHRA's Board of Commissioners has authorized up to 124.

Family Unification Program: KHRA applied for the Family Unification Program but was not selected in 2010. Another application was submitted in December 2010.

Provide an improved living environment

Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments: KHRA has participated in the Family Self Sufficiency and Community Supportive Services (HOPE VI). Eighty-two participants have completed and graduated from KHRA's Family Self Sufficiency (FSS) program.

Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments: KHRA allows transfers for the purpose of pursuing employment. Developments that have higher incomes are located near employment opportunities.

Implement public housing security improvements: In recent years, KHRA has installed security cameras in most public housing developments. We work with the Kingsport Police Department to implement community policing and monitor activities at our public housing developments. We participate with SCKCDI in implementing the Weed and Seed grants. KHRA is a key participant in the City of Kingsport Targeted Community Crime Reduction Grant.

ROSS Elderly Grant

Promote self-sufficiency and asset development of assisted households

Increase the number and percentage of employed persons in assisted families: Family Self Sufficiency (FSS) and Community Supportive Services (CSS) Programs are utilized in both Public Housing and Section 8. A primary objective of these programs is increasing employment opportunities. KHRA has had 82 persons successfully complete FSS and CSS.

Provide or attract supportive services to improve assistance recipients' employability: KHRA works with Alliance for Business and Training (AB&T), Youth Build, Eastern 8, VISTA, SCKCDI and Title V to assist residents in obtaining higher levels of employment.

Provide or attract supportive services to increase independence for the elderly or families with disabilities: KHRA sponsors Community Cares and VISTA to assist in providing services to elderly and disabled families. KHRA is also implementing a ROSS Elderly Grant. We also partner with the Area Council on Aging and the University of Tennessee Agricultural Extension Service.

Continuum of Care: KHRA works closely with ARCH on Shelter Plus Care, Supportive Housing and HOPWA. KHRA is currently providing housing assistance to over 160 families. We work with a number of case management not for profits; Frontier health is the principal provider.

Ensure equal opportunity and affirmatively further fair housing

Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status and disability: KHRA sponsors training for staff on these issues. The training is conducted by Legal Aid of East Tennessee and Wilson, Worley, Moore, Gamble and Stout, counsels for KHRA.

Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion, national origin, sex, familial status and disability: KHRA sponsors training for staff on these issues. The training is conducted by Legal Aid of East Tennessee and Wilson, Worley, Moore, Gamble and Stout, counsels for KHRA.

Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required: The ACOP directs that priority be given to persons with disabilities. KHRA provides modifications for ramps, grab bars, hearing impairments and other accessibility items as requested.

VIOLENCE AGAINST WOMEN –

ACOP:

KHRA strives to meet the needs of adult and child victims of domestic violence, dating violence, sexual assault, and stalking. Any applicant who can provide verification of an existing abuse situation may qualify for a preference.

In accordance with the Violence Against Women Act (VAWA), KHRA will not evict a resident who is a certified victim of an actual or threatened incident of domestic abuse as defined by the Act. Also, KHRA will not evict a resident who is a certified victim for criminal activity that is directly related to domestic abuse. However, KHRA may evict the perpetrator. Also, KHRA may evict a resident who is a victim if there is an actual and immediate threat of harm to others or for other lease violations not based on domestic abuse.

KHRA will give a resident 14 business days after written request to certify victim status either by (1) completing and submitting to KHRA HUD certification form 50066 (which is available at the rental office); or (2) providing KHRA with documentation signed by an employee, agent, or volunteer of a victim service provider, an attorney, or a medical professional from whom the victim (you or another member of your immediate family) has sought assistance in addressing domestic violence, dating violence, or stalking or the effects of the abuse (this certification must be sworn under penalty of perjury); or (3) producing a Federal, State or local police or court record.

Section 8 Administrative Plan:

The PHA acknowledges that a victim of domestic violence, dating violence, or stalking may have an unfavorable history that would warrant denial under the PHA's policies. Therefore, if the PHA makes a determination to deny admission to an applicant family, the PHA will include in its notice of denial a statement of the protection against denial provided by VAWA and will offer the applicant the opportunity to provide documentation affirming that the cause of the unfavorable history is that a member of the applicant family is or has been a victim of domestic violence, dating violence, or stalking.

The documentation must include two elements:

A signed statement by the victim that provides the name of the perpetrator and certifies that the incidents in question are bona fide incidents of actual or threatened domestic violence, dating violence, or stalking, and

One of the following:

A police or court record documenting the actual or threatened abuse, or

A statement signed by an employee, agent or volunteer of a victim service provider; an attorney; a medical professional; or another knowledgeable professional from whom the victim has sought assistance in addressing the actual or threatened abuse. The professional must attest under penalty of perjury that the incidents in question are bona fide incidents of abuse, and the victim must sign or attest to the statement.

The applicant must submit the required documentation with her or his request for an informal review (see section 16-III.D) or must request an extension in writing at that time. If the applicant so requests, the PHA will grant an extension of 10 business days, and will postpone scheduling the applicant's informal review until after it has received the documentation or the extension period has elapsed. If after reviewing the documentation provided by the applicant the PHA determines the family is eligible for assistance, no informal review will be scheduled and the PHA will proceed with admission of the applicant family.

In cases where an applicant family includes the perpetrator as well as the victim of domestic violence, dating violence, or stalking, the PHA will proceed as above but will require, in addition, either (a) that the perpetrator be removed from the applicant household and not reside in the assisted housing unit or (b) that the family provide documentation that the perpetrator has successfully completed, or is successfully undergoing, rehabilitation or treatment.

If the family elects the second option, the documentation must be signed by an employee or agent of a domestic violence service provider or by a medical or other knowledgeable professional from whom the perpetrator has sought or is receiving assistance in addressing the abuse. The signer must attest under penalty of perjury to his or her belief that the rehabilitation was successfully completed or is progressing successfully. The victim and perpetrator must also sign or attest to the documentation. This additional documentation must be submitted within the same time frame as the documentation required above from the victim.

6.0 PHA Plan Update

(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:

2010-65 Revised the Admin Plan to include language on mobility assistance to HCV participants

2010-64 Revised ACOP to include Social Security Documentation Page 5, Section D and include Violence Against Women information Page 11, Section 5.1

2010-54 Change Procurement Policy to include Tennessee Cooperative Purchasing Network and HUD approved ARRA wording

2010-40 FMR payment standard set at 120%

2010-42 Disposition Policy Updated

2010-27 ACOP Revision—Grounds for denial & Community Service /Self-Sufficiency Requirements.

2010-13 Updated Procurement Policy -small purchase threshold set at \$2,000

(b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions.

Main Administrative Office, 906 E Sevier Ave, Kingsport, TN

Web Site: www.kingsporthousing.org

Program	Policy	Document	Location
Public Housing	Eligibility	ACOP	Section 3.2
-	Selection and Admissions	ACOP	Sections 3.3 and 5.3
	Deconcentration	ACOP	Section 5.4
	Waiting list Procedures	ACOP	Section 4.0 -4.6
Housing Choice Voucher Program	Eligibility	Admin Plan	Chapter 3
-	Selection and Admissions	Admin Plan	Chapter 4 Part 3
	Waiting list Procedures	Admin Plan	Chapter 4 Part 2

2. Financial Resources

Program	Program Area	Grant Number	Authorized
Capital Fund Program			
FY 2007	CFP	TN37P006501-07	\$842,713
FY 2008	CFP	TN37P006501-08	\$911,143
FY 2009	CFP	TN37P006501-09	\$879,720
FY 2010	CFP	TN37P006501-10	\$768,146
FY 2010 RHF	CFP	TN37R006501-10	\$80,833
Capital Fund Recovery Competitive Grants	CFRC	TN00600000409R	\$867,307
Housing Opportunities for Persons with AIDS	HPAC	TNH060021	\$1,067,145
Albo	III AO	11111000021	ψ1,001,143
Resident Opportunity & Self Sufficiency			
Homeownership	ROSS	TN006REF041A007	\$250,000
Elderly/Disabled	ROSS	TN006REL024A007	\$249,804
PH FSS Coordinator	ROSS	TN006RFS177A009	\$62,305
Service Coordinator	ROSS	TN006RPS081A009	\$240,000
Special Needs Assistance			
SNAP I Pro Rata	SNAP	TN0102B4J090802	\$65,761
SNAP la Bonus	SNAP	TN0101B43090802	\$42,732
SNAP II Bonus	SNAP	TN37B709001	\$82,009
SNAP III Bonus	SNAP	TN0095B4J090800	\$83,227
Shelter Plus Care			
SPC I	SPC	TN0103C4J090802	\$179,412
SPC II	SPC	TN0120C4J090901	\$334,572
SPC III	SPC	TN37C509001	\$195,480

PH Operating Subsidy for	CY 2010			\$2,082,581
Housing Choice Voucher F	Program			
Housing Assistance Paym	ent (HAP)			\$5,793,388
Administration				\$660,484
3. Rent Determination				. ,
Program	Policy	Document	Location	
Public Housing	Rent determination	ACOP	Section 6	
Housing Choice Voucher Program	Rent Determination	Admin Plan	Section 6 Part 3	
1. Operation and Manageme	ent			
Program	Policy	Document	Location	
Public Housing	Maintenance Manual	ACOP	Section 9	
Housing Choice Voucher Program	Maintenance Manual	Admin Plan	Chapter 8 part 2	2 - Inspections
5. Grievance Procedure				
Program	Policy	Document	Location	
Public Housing	Grievance Procedure	ACOP	Section 16	
		Lease	Section 12, pag	
Housing Choice Voucher Program	Grievance procedure	Admin Plan	Chapter 12 and	Chapter 16 part 3
6. Designate Housing for Ele	derly and Disabled Families	<u> </u>		
Program	Policy	Document	Location	
Public Housing	None for the coming year		•	
Housing Choice Voucher Program	None for the coming year	ar		
7. Community Service				
Program	Policy	Document	Location	
Public Housing	Community Service	ACOP Lease	Section 7 Section 17, page	e 14
B. Safety and Crime Prevent				
Public Housing: KHRA is invo Weed & Seed, Neighborhood Criminal Trespass Policy (AC	Watch, Security Cameras, Co	ommunity Policing	ty of our communitien, Kingsport Police D	es for the residents. Department MOA,
). Pets				
9. Pets Program	Policy	Document	Location	
	Policy Pets	ACOP	Section 10	. 7
Program	-			e 7
Program	-	ACOP	Section 10	e 7
Program Public Housing 10. Civil Rights Program	Pets	ACOP Lease	Section 10	e 7
Program Public Housing 10. Civil Rights	Pets	ACOP Lease Document ACOP	Section 10 Section 5L, page Location Section 1	e 7
Program Public Housing 10. Civil Rights Program Public Housing	Pets Policy Civil Rights	ACOP Lease Document ACOP Lease	Section 10 Section 5L, page Location Section 1 Section 16	e 7
Program Public Housing 10. Civil Rights Program	Pets	ACOP Lease Document ACOP	Section 10 Section 5L, page Location Section 1	e 7
Program Public Housing 10. Civil Rights Program Public Housing Housing Choice Voucher Program 11. Fiscal Year Audit	Pets Policy Civil Rights Civil Rights	ACOP Lease Document ACOP Lease	Section 10 Section 5L, page Location Section 1 Section 16	e 7
Program Public Housing 10. Civil Rights Program Public Housing Housing Choice Voucher	Pets Policy Civil Rights Civil Rights	ACOP Lease Document ACOP Lease	Section 10 Section 5L, page Location Section 1 Section 16	e 7

Program	Policy	Document	Location
Public Housing	VAWA	Lease	Section 11
		ACOP	Section 5.1
		ACOP Guide	Chapter 15.5
Housing Choice Voucher Program	VAWA	Admin Plan	Chapter 12 Part 2 (a)
		Admin Plan	Chapter 12 Part 3 (g)

Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. Include statements related to these programs as applicable.

Status of HOPE VI revitalization grant:

Activities pursuant to an approved Revitalization Plan underway

Do plan to apply for a HOPE VI Revitalization Grant in the Plan Year – Lee Apartments

Do plan to engage in mixed-finance development activities for public housing in the Plan Year (Riverview Apartments) Will be conducting other public housing development or replacement activities not discussed in the Capital Fund Program

Annual Statement

In 2008

As part of the KHRA HOPE VI application, we successfully applied for Low Income Housing Tax Credits for 38 units. We were awarded \$4.84 million of tax credits. We have negotiated the sale of the tax credits to investors.

In 2009

We are working to develop an additional seven units of Homeownership utilizing the Replacement Housing Factor fund.

In 2010

Completed sale of 24 HOPE VI Homeownership Units and completed and occupied 38 mixed finance units.

Г	
Ļ	Demolition/Disposition Activity Description
	1a. Development name: Riverview Apartments
	1b. Development (project) number: TN006-002 and TN006-003
	2. Activity type: Demolition \(\sum_{\text{op}} \)
	Disposition
	3. Application status (select one)
	Approved 🛛
	Submitted, pending approval
	Planned application
	4. Date application approved, submitted, or planned for submission: (DD/MM/YY) 10/4/06
	5. Number of units affected: 92
	6. Coverage of action (select one)
	Part of the development
	Total development
	7. Timeline for activity:
	a. Actual or projected start date of activity: 7/1/08b. Projected end date of activity: 7/1/09
L	b. Projected end date of activity. 7/1/09
	Demolition/Disposition Activity Description
	1a. Development name: Riverview Apartments
	1b. Development (project) number: TN006-002 and TN006-003
	2. Activity type: Demolition
	Disposition 🛛
	3. Application status (select one)
	Approved
	Submitted, pending approval 🛛
	Planned application
	4. Date application approved, submitted, or planned for submission: (DD/MM/YY) 10/4/06
	5. Number of units affected: 92
	6. Coverage of action (select one)
	I Dort of the development
	Part of the development
	☐ Total development
=	Total development7. Timeline for activity:
	☐ Total development

Voluntary Conversion of Public Housing Developments

Required Initial Assessment (originally signed 1/14/03)

As required by 24 CFR parts 972 - Conversion of Public Housing to Tenant-Based Assistance, we have:

- 1. Reviewed each development's operation as public housing;
- 2. Considered the implications of converting the public housing to tenant-based assistance; and
- 3. Concluded that the conversion of the development may be:
 - Inappropriate because removal of the development would not meet the necessary conditions for voluntary conversion.

Necessary conditions for voluntary conversion:

- · Not be more expensive than continuing to operate the development (or portion of it) as public housing;
- · Principally benefit the residents of the public housing development to be converted and the community; and
- Not adversely affect the availability of affordable housing in the community.

Development Number/Name	Development Exempted?	Exemption Reason	Conversion Appropriate?
TN006-01 Robert E Lee Apartments	No	N/A	No
TN006-02 Riverview Apartments	No	N/A	No
TN006-03 Riverview Apartments	No	N/A	No
TN006-04 Frank L Cloud Apartments	No	N/A	No
TN006-07 Dogwood Terrace Apartme	ents No	N/A	No
TN006-09 Holly Hills Apartments	No	N/A	No
TN006-11 Tiffany Court Apartments	No	N/A	No

Kingsport Housing & Redevelopment Authority has assessed the viability of voluntary conversion of public housing developments to Section 8 Tenant-Based Assistance. We have determined that this voluntary conversion does not meet the necessary conditions and would be inappropriate. Conversion to Section 8 would be more expensive to operate than public housing. These calculations are part of the documentation required for our agency plan for the year starting April 1, 2003. Additionally, we feel the conversion of these units would not principally benefit the residents and community. Also, it would possibly negatively affect the availability of affordable housing in the community.

Section 8 Homeownership Capacity Statement

Kingsport Housing & Redevelopment Authority has developed capacity in the Section 8 Homeownership Program. We feel we have demonstrated the capacity to administer this program due to the following reasons.

First, we currently administer 1,242 units of Section 8 Tenant-Based Assistance with over 25 years of experience.

Second, we are administering 76 Family Self-Sufficiency Vouchers with 34 having contributions to their escrow accounts.

Third, a review in 2001 of the Section 8 program participant's income level indicated 81 families that meet the initial income level for homeownership eligibility. We have surveyed these families and a number expressed interest in homeownership and are enrolled in Family Self Sufficiency.

Fourth, Kingsport Housing & Redevelopment Authority has completed administering the financial part of the homeownership program sponsored by the Greater Kingsport Alliance for Development. This fund has financed down payment and closing costs that have led to the purchase of over forty homes.

Fifth, Kingsport Housing & Redevelopment Authority continues to work in partnership with the local legal services office on this program. Kingsport Housing & Redevelopment Authority will make the program known to potential homeowners and Legal Services will provide counseling. Kingsport Housing & Redevelopment Authority has revised the Section 8 Administrative Plan concerning Homeownership.

Lastly, Kingsport Housing & Redevelopment Authority is working with Eastern Eight Community Development Corporation on the implementation of our Homeownership Program. Currently, 48 FSS participants attended an Eastern Eight Homeownership Training Class.

To date, KHRA has closed on 26 homes. Our goal for calendar year 2011 is to close an additional 12 homes.

Project Based Vouchers

In 2008, KHRA Board of Commissioners authorized the staff to project-base up to 10% of KHRA's 1,242 tenant-based vouchers. A Request for Proposals was issued and applications were submitted. Four developments requesting 115 units for elderly and disabled families and individuals were selected to be project-based. Additional proposals will be considered until a total of 124 units are project-based.

- **8.0 Capital Improvements.** Please complete Parts 8.1 through 8.3, as applicable.
- 8.1 Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the Capital Fund Program Annual Statement/Performance and Evaluation Report, form HUD-50075.1, for each current and open CFP grant and CFFP financing.

HUD-50075.1 CFP 501-07 P&E 9/30/10

	HUD-50075.1 CFP 501-08 P&E 9/30/10
	HUD-50075.1 CFP 501-09 AMP 1 P&E 9/30/10
	HUD-50075.1 CFP 501-09 AMP 2 P&E 9/30/10
	HUD-50075.1 CFP 501-09 AMP 3 P&E 9/30/10
	HUD-50075.1 CFP 501-09 Overall P&E 9/30/10
	HUD-50075.1 CFP 501-10 AMP 1 P&E 9/30/10
	HUD-50075.1 CFP 501-10AMP 2 P&E 9/30/10
	HUD-50075.1 CFP 501-10 AMP 3 P&E 9/30/10
	HUD-50075.1 CFP 501-10 Overall P&E 9/30/10
	HUD-50075.1 TN37S00650109 P&E 9/30/10
	HUD-50075.1 TN00600000409R P&E 9/30/10
	HUD-50075.1 CFP 501-11 AMP 1 Original Annual Statement
	HUD-50075.1 CFP 501-11 AMP 2 Original Annual Statement
	HUD-50075.1 CFP 501-11 AMP 3 Original Annual Statement
	HUD-50075.1 CFP 501-11 AMP 5 Original Annual Statement
	HUD-50075.1 CFP 501-11 Overall Original Annual Statement
	Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the Capital Fund
	Program Five-Year Action Plan, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year
	for a five year period). Large capital items must be included in the Five-Year Action Plan.
8.2	HUD-50075.2 AMP 1
	HUD-50075.2 AMP 1
	HUD-50075.2 AMP 2
	HUD 50075.2 AMP 5
	HUD-50075.2 Overall
	HUD-50075.2 Overall
	Capital Fund Financing Program (CFFP).
8.3	Capital Fund Financing Frogram (CFFF). Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to
	finance capital improvements.
9.0	Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available
	data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in
	the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and
	other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address
	issues of affordability, supply, quality, accessibility, size of units, and location.

Housing Needs of Families on the PHA's Waiting Lists					
Waiting list type: (select one)					
Section 8 tenant-based assistance					
Public Housing					
Combined Section 8 and Public Housing					
		sdictional waiting lis	t (optional)		
	which development/	_	(opinonal)		
, , , ,	# of families	% of total families	Annual Turnover		
Waiting list total	2326		348		
Extremely low income	1928	82.89			
<=30% AMI					
Very low income	338	14.53			
(>30% but <=50% AMI)					
Low income	7	0.30			
(>50% but <80% AMI)					
Families with children	1584	68.10			
Elderly families	112	4.82			
Families with Disabilities	364	15.65			
Race/ethnicity White	2065	88.78			
Race/ethnicity Black	252	10.83			
Race/ethnicity Asian	4	0.17			
Race/ethnicity Other	5	0.21			
Characteristics by Bedroom					
Size (Public Housing Only)					

Haveina	Needs of Femilies	on the DII the West:	I :
	Needs of Families	on the PHA's Waiti	ng Lists
1BR			
2 BR			
3 BR			
4 BR			
5 BR			
5+ BR			
	SED (# OF MONTHS)? to reopen the list in the	e PHA Plan year? No	Yes list, even if generally closed?
		on the PHA's Waiti	ng Lists
Waiting list type: (select	,		
Section 8 tenant-ba	ased assistance		
Public Housing			
Combined Section	8 and Public Housi	ng	
		sdictional waiting list	(optional)
_	hich development/s	•	(°F :: ° ::::)
ii asou, identilly w	# of families	% of total families	Annual Turnover
Waiting list total	613	, , , , , , , , , , , , , , , , , , , ,	300
Extremely low income	537	87.60	
<=30% AMI		51155	
Very low income	65	10.60	
(>30% but <=50% AMI)			
Low income	2	0.33	
(>50% but <80% AMI)			
Families with children	267	43.56	
Elderly families	18	29.36	
Families with Disabilities	73	11.91	
Race/ethnicity White	492	80.26	

Race/ellillicity willte	432	00.20	
Race/ethnicity Black	113	18.43	
Race/ethnicity Asian	2	0.33	
Race/ethnicity Other	6	0.98	
Characteristics by Bedroom			
Size (Public Housing Only)			
1BR	352	57.42	25
2 BR	182	29.70	100
3 BR	72	11.75	100
4 BR	7	1.14	75
5 BR	0	0	0
5+ BR	0	0	0
Is the waiting list closed (sele	ct one)? 🛛 No 🗍 Ye	·s	

14	1700	٠
11	VCS	

HOW	LONG	HAS IT	BEEN	CLOSED	(# OF	MONTHS)	
-----	------	--------	------	--------	-------	---------	--

Does	the PHA expect to reopen the list in the PHA Plan year? \(\bigcap\) No \(\bigcap\) Yes
Does	the PHA permit specific categories of families onto the waiting list, even if generally closed?
\square N	o □ Ves

9.1 Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.

Maximize the number of affordable units available within current resources by:

Employ effective maintenance and management policies to minimize the number of public housing units off-line Reduce turnover time for vacated public housing units

Reduce time to renovate public housing units

Seek replacement of public housing units lost to the inventory through mixed finance development

Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources

Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction

Undertake measures to ensure access to affordable housing among assisted families, regardless of unit size required Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration

Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program

Participate in the Consolidated Plan development process to ensure coordination with broader community strategies

Increase the number of affordable housing units by:

Apply for additional section 8 units should they become available (Family Unification Program)

Leverage affordable housing resources in the community through the creation of mixed - finance housing

Pursue housing resources other than public housing or Section 8 tenant-based assistance.

Continue Continuum of Care; Eastern 8 Community Development Corporation; Interfaith Hospitality Network

Target available assistance to families at or below 30% of AMI:

Employ admissions preferences aimed at families with economic hardships

Adopt rent policies to support and encourage work

CSS in HOPE VI

Target available assistance to families at or below 50% of AMI:

Employ admissions preferences aimed at families who are working

Adopt rent policies to support and encourage work

CSS in HOPE VI

Target available assistance to the elderly:

Apply for special-purpose vouchers targeted to the elderly, should they become available

Target available assistance to Families with Disabilities:

Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing

Apply for special-purpose vouchers targeted to families with disabilities, should they become available

Affirmatively market to local non-profit agencies that assist non-profit agencies that assist families with disabilities

Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:

Affirmatively market to races/ethnicities shown to have disproportionate housing needs

Conduct activities to affirmatively further fair housing:

Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units

Market the section 8 program to owners outside of areas of poverty/minority concentrations

Reasons for selecting strategies:

Funding constraints

Staffing constraints

Limited availability of sites for assisted housing

Extent to which particular housing needs are met by other organizations in the community

Evidence of housing needs as demonstrated in the Consolidated Plan and other information available

Results of consultation with local or state government

Results of consultation with residents and the Resident Advisory Boards

Results of consultation with advocacy groups

- 10.0 Additional Information. Describe the following, as well as any additional information HUD has requested.
 - (a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.

The Kingsport Housing & Redevelopment Authority continues to make progress in meeting our goals embodied in our Annual Plan and Five Year Plan. We have converted Public Housing units to asset based management and continue to refine our operations. We are continuing community revitalization for the Riverview Apartments and the surrounding area. This is exhibited by the successful funding of HOPE VI, redevelopment of dilapidated commercial areas, rehabilitation and addition an to the V. O. Dobbins recreation center, and demolition of 92 units of public housing and the construction of 38 replacement units.

We have had continued success in utilizing our HAP funds in the tenant based voucher program. We have averaged 1,167 under lease each month in Calendar Year 2010. We continued to receive funding for a Family Self Sufficiency Coordinator and FSS Homeownership Coordinator. We have 135 FSS participants with 2 currently in the homeownership program and had 26 homeownership closings. There were and 3 HCV FSS graduates with escrows of \$10,270.41 with one going directly into the homeownership program. Escrow total for the FSS HCV Program is \$125,193.16 and FSS PH Program is \$24, 208.44 for a total of \$149,401.60 at year end December 31st, 2010. We have 11 HCV participants and 2 PH participants credit-ready and 2 HCV participants ready to close. The unavailability of down payment and closing cost funding has slowed progress in homeownership. Also, KHRA was required to discontinue the Success Rate Payment Standards, which has reduced the amount of dollars available to assist with the mortgage costs.

KHRA is a participant in Continuum of Care programs and is a member of the Appalachian Regional Coalition (ARCH) on homelessness. KHRA's Shelter Plus Care program continues to operate three increments. Over 140 individuals will be assisted when all increments are fully implemented. We have received funding for 7 increments of Supportive Housing for an estimated 110 participants. In addition, KHRA operates a HOPWA program that will house approximately 50 families. KHRA has worked with Frontier Health to coordinate supportive service and Section 8 assistance for persons under case management for mental health disability. GKAD is working with Interfaith Hospitality Network to acquire two (2) houses, rehabilitate them and lease to homeless families. Project based Section 8 funding for special needs housing (from our tenant based program) was approved for developments covering 115 units in 4 counties. The total number of units authorized for project basing by the KHRA Board of Commissioners is 124. We will continue to evaluate proposals from Not for Profit organizations that develop special needs housing for low income disabled and elderly persons.

The partnership with Eastern Eight Community Development Corp continues providing homeownership training, counseling and mortgage financing assistance. Eastern Eight is providing housing counseling and financing coordination for all the homeowners in the HOPE VI homeownership program. We also continue to work with USDA Agriculture division in Greeneville, utilizing their financing for up to 12 homes in our homeownership program.

The Division of Mental Retardation Services has continued the inspection contract/services provided by KHRA. The program has expanded to cover 16 counties consisting of over 300 homes.

KHRA has continued to work with the Carpenter's Helper of First Broad Street United Methodist Church, Appalachian Service Project and the City of Kingsport Community Development Department on the implementation of Community Development funds for a housing rehabilitation program. The program rehabbed 41 owner occupied homes for low income persons. Also, six dilapidated properties were purchased and demolished.

The Weed & Seed grant received by South Central Community Development Corp, Inc continues to be implemented. KHRA staff is a partner in this grant and will end 3/31/10. The Weed & Seed grant was renewed in the amount of \$142,500. The grant funds police patrols, after school youth programs, summer youth and safe haven programs in the target area that includes Lee Apartments and Riverview Apartments. KHRA is participating in a new opportunity with the Kingsport Police Department in the Targeted Community Crime Reduction Grant through the State of Tennessee.

We have continued our support for the VISTA program with four VISTA members who work with Resident Associations and Learning Centers to enhance resident utilization of programs participated in by KHRA. The VISTA members work wit the Resident Association, Learning Centers and of programs participated in by KHRA. The Community Cares program has with two service providers who work with disabled and elderly. The Boys & Girls Club satellite centers continue to provide services in Riverview, Cloud (AMP TN006-2) and Holly Hills (AMP TN006-3). Lee Family Learning Center (LFLC) (AMP TN006-1) continues to be funded by CDBG and KHRA funds.

During 2010, we continued the implementation of 4 ROSS grants. One for development of elderly services for \$250,000 over three years and 2 for Public Housing Homeownership activity, also for three years each for \$250,000. The fourth ROSS grant is for Public Housing FSS and is for one year.

(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"

Kingsport Housing & Redevelopment Authority will consider the following to be significant amendments or modifications:

Additions of non-emergency work items (items not included in the current Annual Statement or 5-Year Action Plan) or change in use of replacement reserve funds under the Capital Fund;

And any change with regard to demolition or disposition, designation, homeownership programs or conversion activities. An exception to this definition will be made for any of the above that are adopted to reflect changes in HUD regulatory requirements; such changes will not be considered significant amendments by the Kingsport Housing & Redevelopment Authority or by HUD.

- 11.0 Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.
 - (a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations (which includes all certifications relating to Civil Rights)
 - (b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)
 - (c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)
 - (d) Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only)
 - (e) Form SF-LLL-A, Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)
 - (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.
 - (g) Challenged Elements
 - (h) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (PHAs receiving CFP grants only)
 - (i) Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (PHAs receiving CFP grants only)

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced 5-Year and Annual PHA Plans. The 5-Year and Annual PHA plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form is to be used by all PHA types for submission of the 5-Year and Annual Plans to HUD. Public reporting burden for this information collection is estimated to average 12.68 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Act Notice. The United States Department of Housing and Urban Development is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality

Instructions form HUD-50075

Applicability. This form is to be used by all Public Housing Agencies (PHAs) with Fiscal Year beginning April 1, 2008 for the submission of their 5-Year and Annual Plan in accordance with 24 CFR Part 903. The previous version may be used only through April 30, 2008.

1.0 PHA Information

Include the full PHA name, PHA code, PHA type, and PHA Fiscal Year Beginning (MM/YYYY).

2.0 Inventory

Under each program, enter the number of Annual Contributions Contract (ACC) Public Housing (PH) and Section 8 units (HCV).

3.0 Submission Type

Indicate whether this submission is for an Annual and Five Year Plan, Annual Plan only, or 5-Year Plan only.

4.0 PHA Consortia

Check box if submitting a Joint PHA Plan and complete the table.

5.0 Five-Year Plan

Identify the PHA's Mission, Goals and/or Objectives (24 CFR 903.6). Complete only at 5-Year update.

- **5.1 Mission**. A statement of the mission of the public housing agency for serving the needs of low-income, very low-income, and extremely low-income families in the jurisdiction of the PHA during the years covered under the plan.
- **5.2** Goals and Objectives. Identify quantifiable goals and objectives that will enable the PHA to serve the needs of low income, very low-income, and extremely low-income families.
- **6.0 PHA Plan Update.** In addition to the items captured in the Plan template, PHAs must have the elements listed below readily available to the public. Additionally, a PHA must:
 - (a) Identify specifically which plan elements have been revised since the PHA's prior plan submission.
 - (b) Identify where the 5-Year and Annual Plan may be obtained by the public. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on its official website. PHAs are also encouraged to provide each resident council a copy of its 5-Year and Annual Plan.

PHA Plan Elements. (24 CFR 903.7)

 Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures. Describe the PHA's policies that govern resident or tenant eligibility, selection and admission including admission preferences for both public housing and HCV and unit assignment policies for public housing; and procedures for maintaining waiting lists for admission to public housing and address any site-based waiting lists.

- 2. Financial Resources. A statement of financial resources, including a listing by general categories, of the PHA's anticipated resources, such as PHA Operating, Capital and other anticipated Federal resources available to the PHA, as well as tenant rents and other income available to support public housing or tenant-based assistance. The statement also should include the non-Federal sources of funds supporting each Federal program, and state the planned use for the resources.
- Rent Determination. A statement of the policies of the PHA governing rents charged for public housing and HCV dwelling units.
- 4. Operation and Management. A statement of the rules, standards, and policies of the PHA governing maintenance management of housing owned, assisted, or operated by the public housing agency (which shall include measures necessary for the prevention or eradication of pest infestation, including cockroaches), and management of the PHA and programs of the PHA.
- Grievance Procedures. A description of the grievance and informal hearing and review procedures that the PHA makes available to its residents and applicants.
- 6. Designated Housing for Elderly and Disabled Families. With respect to public housing projects owned, assisted, or operated by the PHA, describe any projects (or portions thereof), in the upcoming fiscal year, that the PHA has designated or will apply for designation for occupancy by elderly and disabled families. The description shall include the following information: 1) development name and number; 2) designation type; 3) application status; 4) date the designation was approved, submitted, or planned for submission, and; 5) the number of units affected.
- 7. Community Service and Self-Sufficiency. A description of: (1) Any programs relating to services and amenities provided or offered to assisted families; (2) Any policies or programs of the PHA for the enhancement of the economic and social self-sufficiency of assisted families, including programs under Section 3 and FSS; (3) How the PHA will comply with the requirements of community service and treatment of income changes resulting from welfare program requirements. (Note: applies to only public housing).
- 8. Safety and Crime Prevention. For public housing only, describe the PHA's plan for safety and crime prevention to ensure the safety of the public housing residents. The statement must include: (i) A description of the need for measures to ensure the safety of public housing residents; (ii) A description of any crime prevention activities conducted or to be conducted by the PHA; and (iii) A description of the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities.

- Pets. A statement describing the PHAs policies and requirements pertaining to the ownership of pets in public housing.
- 10. Civil Rights Certification. A PHA will be considered in compliance with the Civil Rights and AFFH Certification if: it can document that it examines its programs and proposed programs to identify any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with the local jurisdiction to implement any of the jurisdiction's initiatives to affirmatively further fair housing; and assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction.
- 11. Fiscal Year Audit. The results of the most recent fiscal year audit for the PHA.
- 12. Asset Management. A statement of how the agency will carry out its asset management functions with respect to the public housing inventory of the agency, including how the agency will plan for the long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs for such inventory.
- 13. Violence Against Women Act (VAWA). A description of: 1) Any activities, services, or programs provided or offered by an agency, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking; 2) Any activities, services, or programs provided or offered by a PHA that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing; and 3) Any activities, services, or programs provided or offered by a public housing agency to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families.
- Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers
 - Hope VI or Mixed Finance Modernization or Development. 1) A description of any housing (including project number (if known) and unit count) for which the PHA will apply for HOPE VI or Mixed Finance Modernization or Development; and 2) A timetable for the submission of applications or proposals. The application and approval process for Hope VI, Mixed Finance Modernization or Development, is a separate process. See guidance on HUD's website at: http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm
 - (b) Demolition and/or Disposition. With respect to public housing projects owned by the PHA and subject to ACCs under the Act: (1) A description of any housing (including project number and unit numbers [or addresses]), and the number of affected units along with their sizes and accessibility features) for which the PHA will apply or is currently pending for demolition or disposition; and (2) A timetable for the demolition or disposition. The application and approval process for demolition and/or disposition is a separate process. See guidance on HUD's website at:

http://www.hud.gov/offices/pih/centers/sac/demo_dispo/index.c

Note: This statement must be submitted to the extent that approved and/or pending demolition and/or disposition has changed.

Conversion of Public Housing. With respect to public housing owned by a PHA: 1) A description of any building or buildings (including project number and unit count) that the PHA is required to convert to tenant-based assistance or

that the public housing agency plans to voluntarily convert; 2) An analysis of the projects or buildings required to be converted; and 3) A statement of the amount of assistance received under this chapter to be used for rental assistance or other housing assistance in connection with such conversion. See guidance on HUD's website at: http://www.hud.gov/offices/pih/centers/sac/conversion.cfm

- (d) Homeownership. A description of any homeownership (including project number and unit count) administered by the agency or for which the PHA has applied or will apply for approval.
- (e) Project-based Vouchers. If the PHA wishes to use the project-based voucher program, a statement of the projected number of project-based units and general locations and how project basing would be consistent with its PHA Plan.
- Capital Improvements. This section provides information on a PHA's Capital Fund Program. With respect to public housing projects owned, assisted, or operated by the public housing agency, a plan describing the capital improvements necessary to ensure long-term physical and social viability of the projects must be completed along with the required forms. Items identified in 8.1 through 8.3, must be signed where directed and transmitted electronically along with the PHA's Annual Plan submission.
 - Capital Fund Program Annual Statement/Performance and Evaluation Report. PHAs must complete the Capital Fund Program Annual Statement/Performance and Evaluation Report (form HUD-50075.1), for each Capital Fund Program (CFP) to be undertaken with the current year's CFP funds or with CFFP proceeds. Additionally, the form shall be used for the following purposes:
 - (a) To submit the initial budget for a new grant or CFFP;
 - To report on the Performance and Evaluation Report progress on any open grants previously funded or CFFP; and
 - To record a budget revision on a previously approved open grant or CFFP, e.g., additions or deletions of work items, modification of budgeted amounts that have been undertaken since the submission of the last Annual Plan. The Capital Fund Program Annual Statement/Performance and Evaluation Report must be submitted annually.

Additionally, PHAs shall complete the Performance and Evaluation Report section (see footnote 2) of the Capital Fund Program Annual Statement/Performance and Evaluation (form HUD-50075.1), at the following times:

- At the end of the program year; until the program is completed or all funds are expended;
- When revisions to the Annual Statement are made, which do not require prior HUD approval, (e.g., expenditures for emergency work, revisions resulting from the PHAs application of fungibility); and
- Upon completion or termination of the activities funded in a specific capital fund program year.

8.2 Capital Fund Program Five-Year Action Plan

PHAs must submit the Capital Fund Program Five-Year Action Plan (form HUD-50075.2) for the entire PHA portfolio for the first year of participation in the CFP and annual update thereafter to eliminate the previous year and to add a new fifth year (rolling basis) so that the form always covers the present five-year period beginning with the current year.

8.3 Capital Fund Financing Program (CFFP). Separate, written HUD approval is required if the PHA proposes to pledge any

- portion of its CFP/RHF funds to repay debt incurred to finance capital improvements. The PHA must identify in its Annual and 5-year capital plans the amount of the annual payments required to service the debt. The PHA must also submit an annual statement detailing the use of the CFFP proceeds. See guidance on HUD's website at:
- $\underline{http://www.hud.gov/offices/pih/programs/ph/capfund/cffp.cfm}$
- 9.0 Housing Needs. Provide a statement of the housing needs of families residing in the jurisdiction served by the PHA and the means by which the PHA intends, to the maximum extent practicable, to address those needs. (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).
 - 9.1 Strategy for Addressing Housing Needs. Provide a description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).
- **10.0** Additional Information. Describe the following, as well as any additional information requested by HUD:
 - (a) Progress in Meeting Mission and Goals. PHAs must include (i) a statement of the PHAs progress in meeting the mission and goals described in the 5-Year Plan; (ii) the basic criteria the PHA will use for determining a significant amendment from its 5-year Plan; and a significant amendment or modification to its 5-Year Plan and Annual Plan. (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).
 - (b) Significant Amendment and Substantial Deviation/Modification. PHA must provide the definition of "significant amendment" and "substantial deviation/modification". (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan.)

- (c) PHAs must include or reference any applicable memorandum of agreement with HUD or any plan to improve performance. (Note: Standard and Troubled PHAs complete annually).
- 11.0 Required Submission for HUD Field Office Review. In order to be a complete package, PHAs must submit items (a) through (g), with signature by mail or electronically with scanned signatures. Items (h) and (i) shall be submitted electronically as an attachment to the PHA Plan.
 - (a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations
 - (b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)
 - (c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)
 - (d) Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only)
 - (e) Form SF-LLL-A, Disclosure of Lobbying Activities
 Continuation Sheet (PHAs receiving CFP grants only)
 - (f) Resident Advisory Board (RAB) comments.
 - (g) Challenged Elements. Include any element(s) of the PHA Plan that is challenged.
 - (h) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (Must be attached electronically for PHAs receiving CFP grants only). See instructions in 8.1.
 - (i) Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (Must be attached electronically for PHAs receiving CFP grants only). See instructions in 8.2.

PHA Certifications of Compliance with PHA Plans and Related Regulations

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011

PHA Certifications of Compliance with the PHA Plans and Related Regulations: Board Resolution to Accompany the PHA 5-Year and Annual PHA Plan

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the X 5-Year and/or Annual PHA , hereinafter referred to as" the Plan", of which this document is a part and Plan for the PHA fiscal year beginning 4/1/2011 make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.

2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.

3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.

4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.

5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.

 The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.

7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.

8. For PHA Plan that includes a policy for site based waiting lists:

The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);

The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;

Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;

The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing:

 The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1). 9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act

of 1975. 10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the

Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped, 11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment

Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.

12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.

13.	The PHA will take appropriate affirmative action t CFR 5.105(a).	o award co	ntracts to minority and women's business enterprises under 24
14.	The PHA will provide the responsible entity or HU	D any doc olicy Act a	umentation that the responsible entity or HUD needs to carry nd other related authorities in accordance with 24 CFR Part 58
15	With respect to public housing the PHA will comp Section 12 of the United States Housing Act of 19:	ly with Day	vis-Bacon or HUD determined wage rate requirements under Contract Work Hours and Safety Standards Act.
16	The PHA will keep records in accordance with 24	CFR 85.20	and facilitate an effective audit to determine compliance with
17	program requirements. The PHA will comply with the Lead-Based Paint I	Poisoning F	Prevention Act, the Residential Lead-Based Paint Hazard
	Local and Indian Tribal Governments), 2 CFR Par Cooperative Agreements to State, Local and Feder	t 225, and 2 rally Recog	irements of OMB Circular No. A-87 (Cost Principles for State, 24 CFR Part 85 (Administrative Requirements for Grants and mized Indian Tribal Governments).
19	 The PHA will undertake only activities and progra covered grant funds only for activities that are app 	ims covered	d by the Plan in a manner consistent with its Plan and will utilize
20	 All attachments to the Plan have been and will con available for public inspection. All required support the Plan and additional requirements at the primar 	ntinue to be erting docur y business	available at all times and all locations that the PHA Plan is ments have been made available for public inspection along with office of the PHA and at all other times and locations identified ailable at least at the primary business office of the PHA.
21	The PHA provides assurance as part of this certification. The Resident Advisory Board had an opportunity before implementation by the PHA; The changes were duly approved by the PH.	cation that: rtunity to re (A Board o	eview and comment on the changes to the policies and programs of Directors (or similar governing body); and
	normal business hours.		view and inspection, at the principal office of the PHA during
22	. The PHA certifies that it is in compliance with all	applicable	Federal statutory and regulatory requirements.
ings	port Housing and Redevelopment Authority		TN006
HA	Name		PHA Number/HA Code
	11	15	
х	5-Year PHA Plan for Fiscal Years 20	20	
	_ Annual PHA Plan for Fiscal Years 20	20	
heret	y certify that all the information stated herein, as well as any info	emation provi	ided in the accompaniment herewith, is true and accurate. Warning: HUD will
200000	y certify that all the information stated herein, as well as any into ute false claims and statements. Conviction may result in crimina	anavor civil i	STIPLIES TO U.S.A. DOVI. DOVIG THE PARTY SECTION ASSESSMENT
100			Title
Name	of Authorized Official		Executive Director
Terr	y W Cunningham		Executive Director

Signature

Date

01/07/2011

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Cingsport Housing and Redevelopment Authority	
rogram/Activity Receiving Federal Grant Funding	
Capital Fund Program	
Acting on behalf of the above named Applicant as its Authoriza ne Department of Housing and Urban Development (HUD) regard	ed Official, I make the following certifications and agreements to ding the sites listed below:
I certify that the above named Applicant will or will continue or provide a drug-free workplace by: a. Publishing a statement notifying employees that the unawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's work-	 Abide by the terms of the statement; and Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction; Notifying the agency in writing, within ten calendar days
blace and specifying the actions that will be taken against imployees for violation of such prohibition. b. Establishing an on-going drug-free awareness program to inform employees (1) The dangers of drug abuse in the workplace; (2) The Applicant's policy of maintaining a drug-free workplace;	after receiving notice under subparagraph d.(2) from an em- ployee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, includ- ing position title, to every grant officer or other designee on whose grant activity the convicted employee was working unless the Federalagency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
(3) Any available drug counseling, rehabilitation, and employee assistance programs; and (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace. c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.; d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will	f. Taking one of the following actions, within 30 calenda days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted — (1) Taking appropriate personnel action against such a employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; of (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, lavenforcement, or other appropriate agency; g. Making a good faith effort to continue to maintain a drug free workplace through implementation of paragraphs a, thru
AMP 1: Robert E Lee Apts, 671 Dale St, Kingsport TN 376 AMP 1: Tiffany Court Apts, 3125 Tiffany Ct, Kingsport TN 376 AMP 2: Frank L Cloud Apts, 1100 Robertson St, Kingsport AMP 3: Dogwood Terrace Apts, 1921 Bowater Dr, Kingsport AMP 3: Holly Hills Apts, 3601 Watterson St, Kingsport AMP 5: Riverview Place, 285 Louis Street, Kingsport, TN 3 Check here if there are workplaces on file that are not identified on the at-	60 37663 TN 37660 ort TN 37660 37660 37660 tached sheets.

DISCLOSURE OF LOBBYING ACTIVITIES

Approved by OMB 0348-0046

Date: 1/7/10

Authorized for Local Reproduction

Standard Form LLL (Rev. 7-97)

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

(See reverse for public burden disclosure.) 1. Type of Federal Action: 2. Status of Federal Action: 3. Report Type: a. initial filing a. bid/offer/application a. contract b b. material change b. initial award b. grant For Material Change Only: c. cooperative agreement c. post-award quarter d. loan date of last report e. loan guarantee f. loan insurance 5. If Reporting Entity in No. 4 is a Subawardee, Enter Name 4. Name and Address of Reporting Entity: and Address of Prime: * Prime Subawardee Tier . if known: Congressional District, if known: Congressional District, if known: 4c 7. Federal Program Name/Description: Federal Department/Agency: Capital Fund Program U.S. Dept of Housing and Urban Development CFDA Number, if applicable: _ 9. Award Amount, If known: 8. Federal Action Number, if known: \$ Individuals Performing Services (including address if 10. a. Name and Address of Lobbying Registrant different from No. 10a) (if individual, last name, first name, MI): (last name, first name, MI): Information requested through this form is authorized by title 31 U.S.C. section 1362. This disciosure of lobbying activities is a material representation of feet. Signature: Print Name: Terry W Cunningham upon which reliance was placed by the ter above when this transaction was made or entered into. This disclosure is required pursuent to 31 U.S.C. 1352. This information will be available for public inspection. Any person who laks to file the Title: Executive Director required disclosure shall be subject to a civil penalty of not less than \$10,000 and

Telephone No.: 423-392-2513

not more than \$100,000 for each such failure.

Federal Use Only:

Certification of Payments to Influence Federal Transactions

Previous edition is obsolete

U.S. Department of Housing and Urban Development Office of Public and Indian Housing

Applicant Name	
Kingsport Housing and Redevelopment Authority	
Program/Activity Receiving Federal Grant Funding Capital Fund Program	
The undersigned certifies, to the best of his or her knowledge and	I belief, that:
The undersigned certifies, to the best of his of her knowledge and	and the state of t
(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connections.	(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.
tion with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.	This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required
(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.	certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.
I hereby certify that all the information stated herein, as well as any i Warning: HUD will prosecute false claims and statements. Conviction i (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)	nformation provided in the accompaniment herewith, is true and accurate nay result in criminal and/or civil penalties.
Name of Authorized Official	Title
Terry W Cunningham	Executive Director
Signature	Date (mm/dd/yyyy)

1/7/2011

Civil Rights Certification

U.S. Department of Housing and Urban Development Office of Public and Indian Housing Expires 4/30/2011

TN006

Civil Rights Certification

Annual Certification and Board Resolution

Kingsport Housing and Redevelopment Authority

The W. gl

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioner, I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

The PHA certifies that it will carry out the public housing program of the agency in conformity with title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990, and will affirmatively further fair housing.

PHA Name	PHA Number/HA Code
I hereby certify that all the information stated herein, as well as any information prov	ided in the accompaniment herewith, is true and accounte. Warning: HUD will
I hereby certify that all the information stated herein, as well as any information pro- prosecute false claims and statements. Conviction may result in criminal and/or civil	penalties. (18 U.S.C. 1001, 1010, 1012, 31 U.S.C. 3729, 3802)
Name of Authorized Official Terry W. Cunningham	Title Executive Director

Date 01/07/2011

Certification by State or Local Official of PHA Plans Consistency with the Consolidated Plan

ī,	Dennis R. Phillips	the	City of Kingspo	rt Mayor	certify	that	the	Five	Year	and
Annual	PHA Plan of the	Kingsport Housing & Ri	edowntopment Autoorly TN 008	is consist	ent with	the C	Cons	olidat	ed Pla	an of
	Kingsport		ed pursuant to 24							

Signed / Dated by Appropriate State or Local Official

Public Housing RAB Comments with Recommendations

This year the Resident Advisory Board (RAB) met on October 14, 2010. We went over the proposed Agency plan and have the following suggestions, comments and observations on that plan.

1. Community Rooms. After last year's comments by the RAB regarding community rooms being shared by KITE leaders and KHRA staff, we feel that things have improved. However, it is still necessary that management work with the tenant leaders, especially at Holston Terrace and the STEPS program in Cloud, to make sure that KHRA management cleans up after the events they have, and notifies the tenants of their planned usage of the community rooms. Thank you for the improvement and let's continue to work on this.

We will work on communications and follow up after events. We appreciate the Resident Associations for their efforts to maintain and monitor activities in the community rooms.

2. **Site Based Management**. The visibility and presence of the site managers on their respective sites was a large concern to the RAB last year. We were specifically concerned 1)that the offices weren't open enough for residents to pay their rent, 2) that the site managers weren't around enough to deal with site issues, and 3)that the site managers' presence was not felt enough in the neighborhood to discourage unregistered guests, violations of the rules and regulations regarding pets, and to create a general knowledge of the community. This has gotten better in some communities. But in Holston Terrace, Dogwood, and Lee, there has been no improvement.

In Holston Terrace, the site manager is not there enough to collect rent and deal with the concerns of the tenants. Likewise, in Dogwood, the site manager is also not present enough to deal with the concerns and collect rent. In Lee, the site manager is not in the office and not walking the neighborhood enough. (Also, there is a concern with the rental drop box. If tenants put in money orders in the dropbox, there is no guarantee that they will get a receipt and be able to prove that the rent had been paid.) If the site manager of Holston Terrace, Dogwood, and Lee were present at the sites more often it would greatly improve the rule and regulation enforcement and the collection of rent.

As to rule enforcement, Cloud is well done, but in the other sites we have seen no improvement at all. There are still many tenants who are not legally registered, but living in the community. There are also many unregistered pets. Both of these degrade the quality of life and cause conflict among neighbors and neighborhoods. The Tenant Council has repeatedly reported these violations to the Kingsport Housing Authority Board and staff. In the past we have been told to continue to report to management these infractions and that management will proceed as they can. But except for Cloud, nothing is done. Too often the site managers tell the offenders who reported them. This puts tenant leaders and those that report violations in a bad situation and at risk of retaliation from the offenders. Management cannot expect resident leaders to report violations if the site managers then divulge who has done the reporting. The policy

adopted in Cloud where a complaint is made in writing, anonymously, and the site manager follows up on it was praised by all the RAB members. However, most site managers don't operate this way. The RAB would greatly appreciate it if the site managers could all adopt this procedure and, if so, the resident leaders then could continue to work with the Housing Authority in eradicating ghost tenants and unregistered pets. Without some policy that assures anonymity, residents find it impossible to work with management in enforcing KHRA rules.

Finally, in Lee, there continues to be a parking sticker problem. Not only are there not enough parking spots (which may be out of control of the Housing Authority), but the parking regulations requiring stickers are not enforced. Given that, tenants cannot find a space while visitors take all of their spaces. There has been no attempt by management to deal with the unstickered parking violations. The RAB sees no reason why tenants should have to park further away for the convenience of others who are merely guests, or living in housing illegally. It seems that adherence to the rules regarding stickers in the parking lot would take care of this.

We will work to maintain a regular presence on all sites. We are communicating to the site based staff about these concerns. We appreciate the discussion provided by the RAB and will work with staff on continuity of policy enforcement.

We are working to expand parking in Lee Apartments. Two dilapidated houses on Tennessee Street have been purchased and demolished. We plan to use Capital Funds to create additional parking on those two lots

3. **Safety.** We have also been informed that the community policing (as we have known it) will be changing and likely result in a lower presence of the police department in our community. That is very unfortunate. We think it will lead to increased safety issues in our neighborhoods. We understand the Housing Authority doesn't control the police. However, we think if a policemen who live in the housing authority, were to drive through the parking lot and neighborhood of the area on the way in and out of their shift it would greatly help. This seems a small step to take for the greater safety obtained.

In some neighborhoods the police work well with residents. But in Holly Hills, Dogwood, and Holston Terrace, there needs to be increased cooperation. Some of the problem seems to be that the county and city police cannot determine who should be responding to complaints in these three neighborhoods. Some discussions with the police department and the sheriff's department to determine who the residents should call for policing might clear this up.

The fact that site managers divulge who is filing complaints against ghost residents and those other rule violators creates a safety problem. As noted above, the retaliation that can be expected when that policy is pursued creates friction in the neighborhood which leads to problems. We feel that this can stop.

We are concerned about the changes in the Community Policing Program by Kingsport Police Department (KPD). We have been told by the City Manager's office that the change was due to staffing and fund issues. We are in contact with the Police Chief and Captain of the Patrol Division. They have assigned the community policing activities to an officer on each shift (with a back-up designated). KHRA units are in the city limits and KPD is the cognizant agency to respond to calls for assistance.

4. Smoking. Last year, after much discussion of the smoking policy and possible alternatives, the RAB took a strong stance on this matter. This hasn't changed. The RAB currently consists of an equal numbers of smokers and nonsmokers, but they are unanimous in their belief that what an individual does in their own apartment is their business. We feel that smoking segregation or ban or smoke-free buildings is entirely unnecessary. We feel it is contrary to the concept of individual rights in America and they strongly oppose it.

KHRA is currently being investigated by the Tennessee Human Rights Commission concerning a complaint that KHRA has not accommodated a household by providing them with a smoke-free environment. Your comments are part of our discussions with the Tennessee Human Rights Commission.

5. Maintenance. Generally speaking, the RAB feels that maintenance is done very well. There is some concerns about the mowers who tend to either not blow the clippings off the sidewalks and porches or if they do blow them, they blow them on the sidewalks and porches. A little more care regarding this would be greatly appreciated.

We will discuss these issues with the mowing companies and site managers on the grass clippings. Thank you for the positive comments on maintenance.

6. Capital improvements. The RAB greatly appreciates the capital improvements made by the Housing Authority in the last year. We felt that the extra funding from the federal government for this purpose has been used wisely and well. We want to thank the Housing Authority for this.

During our discussion with Mr. Cunningham, he explained that perhaps the Housing Authority may be looking at demolishing Lee, or at the very least restructuring the neighborhood. Given the fact that we have significant experience with HOPE VI from the Riverview project, the RAB discussed this at length.

We understand the need for thinning out the population density and for creating newer homes where old ones exist. However, we are adamantly against the idea that anyone would lose their home. Therefore, we feel that given the fact that de-concentration would require fewer units and fewer residences at that site, the replacement of the reduction of number units be made up at least with vouchers. In other words, no one should lose their KHRA rental subsidy due to demolition or HOPE VI renewal of Lee. We feel that given the economic circumstances of the times, the Community of Kingsport cannot afford to lose any more affordable housing. We see

where vouchers enable individuals to make their own choices, whether they wish to return to the old neighborhood or move somewhere more to their liking.

We feel that the HOPE VI project in Riverview was correct in allowing previous residents who were originally from the neighborhood go back first, because there is a strong connection and history to growing up somewhere. However, we also understand that not everyone could go back. But no one should lose a subsidy.

Finally, in this regard, we feel that if the Housing Authority undertakes a HOPE VI (or similar) project for Lee, they make it very clear (and much clearer than they did in the Riverview project) the rules for returning to the original neighborhood. Despite the fact the residents in the Riverview project were told that would be additional requirements, (including work and schooling, etc.), in order for them to return, this was not stressed enough to make it clear. For instance, the entire Board of the RAB was unaware that there would be rules to return to the old Riverview neighborhood until the project was well underway. This needs to be stressed in the future so that people can be aware of this before the project at Lee is undertaken or even applied for.

We will work to make sure that on any future revitalization efforts that all current residents continue to receive housing assistance. This was the case on the Riverview Hope VI project. All Riverview residents received relocation assistance and moved to Section 8 or another Public Housing location. All provisions of HOPE VI will be emphasized to all current residents.

7. KHRA Board. For a number of years now we have urged the Kingsport Housing and Redevelopment Board to allow the tenants to select the resident member that sits on the KHRA Board. We are aware that the law states that the mayor selects the Board member and that that is out of the hands of the KHRA Board. However, while the law states that the mayor appoint a resident representative, the Board should urge the mayor to agree that a representative elected by the tenants be the representative that he or she (the mayor) appoints to the Board. We feel that the tenants should have a direct representative.

We follow Tennessee State Code and HUD regulations concerning board vacancies. Mayor of Kingsport cooperated with appointing KHRA resident leaders, Grace Simpson, Johnny Richer and Nedra Griffin during the time this requirement to have a program participant on the Board of Commissioners.

8. Maintenance plan. It was described to us that the maintenance plan of the Housing Authority was being revised and reviewed and would be presented later. Since we do not have a copy of it now we can make no comments on it but will reserve comment at such time as we have the ability to review it.

We have an updated Maintenance Plan. As part of the revisions we have renamed it and now refer to it as an Operation and Maintenance Plan.

Thank you for your participation and we look forward to working with you as part of KITE Resident Council.

Sincerely,
SANDRA BLY
ARLENA LOVIN
FAY REED
SHARONSWANNER
(attended meeting for Fay Reed who was unable to attend)
WILLIE OVERBAY
DEBBIE CASH
MARY BEATTY

Housing Choice Voucher RAB Comments with Recommendations

After meeting with Mr. Cunningham and going over the Agency plan for the year, the RAB met privately and discussed various topics.

First of all, as a Resident Advisory Board we think that the Kingsport Housing and Redevelopment Authority (KHRA) does a very good job in its Section 8 Program. We are particularly pleased with the in-house voucher management and feel that they make every effort to have the best program possible. We also feel that they listen to us throughout the year, not only at comment time. Having said that our comments are as follows:

We want to thank the participants of the 2010 Section 8/Housing Choice Voucher Resident Advisory Board. Your comments on our proposed agency plan are important. Also, I appreciate your participation and that we welcome your input throughout the year.

1. **Homeownership**. We continue to laud the KHRA on its homeownership efforts. It is clear that homeownership is an asset. Accumulation of assets is one of the touchstones to leaving poverty behind. KHRA continues to press forward on this and continues to place more and more people in homes. We urge KHRA to make every effort to continue to do this.

We will continue to work with HCV holders to become homeowners. We have moved this responsibility to the Freshstart Foundation staff.

2. **Homelessness.** It was explained to us that KHRA has been participating in the Shelter Plus Care Program which places homeless individuals in homes throughout our area. We understand that while many of the homeless individuals are residing in Washington County due to proximity to various services, we feel that an area wide effort in Upper East Tennessee regarding homelessness is a valuable asset to our communities and the KHRA should be urged to continue to pursue this. We also feel it is important that KHRA work with various other homeless agencies as they have in the past.

KHRA continues to look for ways to assist with the elimination of homelessness in the eight county region of East Tennessee. We are currently assisting over 150 households through Shelter plus Care, supportive housing and HOPWA.

3. **Payment Standard**. Last year we requested that the payment standard be continued at 110% despite urgings of HUD to lower it. The KHRA Board adopted this position and we thank you for listening to us.

We want to continue to maintain the payment standard at the 110% level. We believe this gives program participants a wider choice of housing and also helps with achieving the goal of homeownership.

4. **Moving to Work**. Like the payment standard last year, we took a position on the Moving to Work Program. At that time we felt that Moving to Work was not for the Kingsport Housing Authority, and that family self-sufficiency (optional) was far superior, and we should stick with the family self-sufficiency model. The Board of Commissioners agreed with this and kept the family self-sufficiency model and decided not to go into the Moving to Work Program. We thank you for listening to us.

KHRA will continue to work with families on a voluntary basis through Family Sufficiency Program.

5. **Crime.** Last year we had specific neighborhoods that we felt should be targeted for the next crime stopping efforts and grants. It is our understanding that there are no funds available this year but we urge the Housing Authority to keep in mind our suggestions and find whatever funds they can to target the areas we spoke of before.

KHRA is working with the Kingsport Police Department and a coalition of community groups through a new grant, The Targeted Community Crime Reduction Program. Some of the neighborhoods targets have a high percentage of low-income rentals. We are hopeful this grant will address some of your concerns.

6 **Elderly Programs**. We were told that KHRA has been awarded a ROSS Grant for additional services to elderly in public housing in the Kingsport Housing Authority. Unfortunately, this is not available to voucher holders. In the past we have urged the Housing Authority Board of Commissioners to work on a state wide scale in order to urge lawmakers and policy makers to allow elderly persons to spend more time in their homes with minor ailments. The State of Tennessee's insistence on services only being available in a nursing home is counter-productive to both the individual's wellbeing and the fiscal wellbeing of the state. We continue to urge you to work on programs available to elderly to keep them in their own homes as long as possible. These should be available not only to public housing residents, but to voucher residents also.

We are concerned about the lack of resources for elderly to live in their homes. We hope that a new governor and administration will bring a different focus on this problem.

7. **Vouchers.** In the past KHRA has been very aggressive in searching out and applying for any available vouchers. We urge the KHRA to continue to do that. Our area is in bad need of affordable housing and with additional vouchers it will encourage the building of affordable housing for the betterment of all.

KHRA continues to apply for any additional voucher dollars to assist low-income families. We recently applied for Family Unification Vouchers.

8. **Waiting List.** The operation of the waiting list in Section 8 voucher was explained to us. While we understand the pros and cons of the argument, we feel that leaving it constantly open, as KHRA does, is the appropriate way to handle the situation. This way KHRA is continually aware of the actual needs of the community and not just a snapshot. We also agree that the preferences given to those who need a reasonable accommodation in public housing, those who are in the home ownership program, and those experiencing domestic violence are good preferences that should be kept in place.

It is our current policy to continue to take applications. Also, we plan to continue the preferences as outlined in the Administrative Plan.

We thank you again for taking our comments seriously in the past and look forward to working with you in the future.

Sincerely, LARHONDA ROBINSON MARY STALLARD MAXINE DARNELL PATTY FLETCHER

Capital Fund Program (CFP) Part I: Summary Annual Statement /Performance and Evaluation Report

us Department of Housing and Urban Development

OMB Approval No. 2577 - 0157 (Exp. 3/31/2002)

Office of Public and Indian Housing

Kingspo PO Box 44	Kingsport Housing & Redevelopment Authority PO Box 44 Kingsport, TN 37662			Capital Fund Number TN37P006501-07	FFY of Grant Approval 2007
D Origina	rousi Statement	Revised Annual Statement/Revision Number	Number F		
	ion Report for Program Year Ending 9/30/10	Final Parformance and Evaluation Report	non		
		Total Estimated Cost	d Cost	Total Actual Cost 2	
Line No.	Summary by Development Account	Original	Revised *	Obligated	Expended
-	Total Non-CGP Funds				
2	1406 Operations	173,600	173,600	173,600	173,600
ω		206,714	178,066	178,066	178,066
4		\$56,456	56,456	\$56,456	\$56,456
Ch	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$41,152	41,152	\$41,152	\$41,102
00					
9	1450 Site Improvement	87,559	58,150	58,150	08,100
10		192.588	250,644	187,712	187,712
-11	-	23,366	23,386	23,366	23,360
12		30,479	30,479	30,479	30,479
13		30,799	30,799	\$30,799	\$30,799
14	1485 Demolition	+			
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18			,		
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant (Sum of lines 2-19)	\$842,712	\$842,712	\$779,780	\$778,780
21	Amount of line 20 Related to LBP Activities	4			
22	Amount of line 20 Related to Section 504 Compilance				
23	Amount of line 20 Related to Security				
24	Conservatio	,	,		
Signature of	Signature of Executive Director and Date	Signature of Public Housing Directon/Office of Native American Programs Administrator and Date	Office of Native American Proj	grams Administrator and Date	
×	J	×			

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
² To be completed for the Performance and Evaluation Report. Terry W. Cunningham, Exelutive Director

third to sense:			Quarter	Davelopment Quantity	neral Description of Major
	Total Actual Cost	Total Estimated Cost	2007-000		
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		and urban payeropment		100	P) Part II: Supporting Pages
OMB Approval No. 2577 -	9	US Department of Housing		iluation Report	formance and Evaluation

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490	499	499	499 C
1,882	1,082	1,882	1,882 C
\$56,456	\$56,456	\$50,456	\$56,456
10,580	16,580	16,590	16,580
24,572	24,572	24,572	24,572 C
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\$41,152	\$41,152	\$41,152	\$41,152
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\$30,789	\$30,799	\$30,799	\$30,799
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1/12/2011 X

⁷ To be completed for the Performance and Evaluation Report.

Development Number / Name	General Caucolption of Major	Development Guardly	T	Total Estimated Cost	Halled Cost Total Actual Co	1 2	Total Actual Cost
haders/Energoode	Wate Categories		Original	Ē	Revised 1	-	Funds Obligated ¹
PHA Wide	Neighborhood Appaarance	1450		21,200	16,379	\neg	15,379
	andreading	1450	_	15,000	6,418		6,418
	Sidwerks/Parking Lots/Alleys/Streets	1460		25,000	9,994		9,994
	Carrie Carrier	1450		14,050	14,050		14,000
	Past Control	1450		2,600	2,600		2,600
	Playground improvements	1450		2,620	2,620		2,620
	Security Cameras	1450		7,089	7,089		7,069
				87,559	88,150		58,150
PHA Wide	Refrigerators	1485.1		12,000	12,000		12,000
Dwelling	Dumpster Repair	1465.1		0	0		0
Equipment	ADA Modifications	1465.1		291	291		291
	Emergency Mold Abatement	1405.1		1,760	1,760		1,760
	HVAC Equipment	1465.1		9,315	9,315		9,315
	200 C C C C C C C C C C C C C C C C C C	X		23,366	23,366		23,366
TN 37P036001 Lee	Interior Doors	1460		0	0		0
			П	0	0		
TN 37P00800M	Replace Water Valves	1480		45,000	45,000		45,000
Cloud	Repair Gym Cailing	1470		30,479	30,479		30,479
	colleges as a con-	10000		75,479	133,535	п	133,535
TN 37P006007	Replace Windows	1460		99.716	99,710		99,716
Dogwood	Security Screens	1460		0	0		0
				99,716	99,716		99,716
TN 17P005009	Kitchen Calcinets/Countertops	1400		42,730	42,730		42,730
MINE AND				42,730	42,730		42,730
TN 27P006011	Replace Auerings	1460		5,142	5,142		5,142
terent court			П	5,142	5,142		5,142
Signature of Executive Director	Directs and Date	4/45/50		# Public Ho	using Director/Office	7.4	Signature of Public Housing Director/Office of Native American Programs Administrator and Date ** ** ** ** ** ** ** ** **
×んしてい		1/12/2011	11 X				

Tarry W Candingham, Essourise Director

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

To be completed for the Performance and Evaluation Report,

Annual Statement /Performance and Evaluation Report Capital Fund Program (CFP) Part III: Implementation Schedule

US Department of Housing and Urban Development Office of Public and Indian Housing

GMB Approval No. 2577 - 0157 (Exp. 3/31/2002)

All Funds Expend Quarter Ending D Actual* Original Revised*	Original Original
All Funds Expens	All Funds Expens
er Ending D	nds Expended er Ending Date Revised Actuar
	ate Actual*

X T. W. G. Terry W Currentytum, Essettive Director

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

To be completed for the Performance and Evaluation Report.

Capital Fund Program (CFP) Part I: Summary Annual Statement /Performance and Evaluation Report

and Urban Development **US Department of Housing**

OMB Approval No. 2577 - 0157 (Exp. 3/31/2002)

Office of Public and Indian Housing

Capital Fund Number

FFY of Grant Approval

Signature of Executive Director and Date PO Box 44 Kingsport, TN 37662 Terry W. Curningham, Executive Director Kingsport Housing & Redevelopment Authority Performance and Evaluation Report for Program Year Ending \$1(30)(2010) Criginal Annual Statement Line No. 23 20 19 8 12 16 13 5 7 8 00 Amount of line 20 Related to Energy Conservation Measures 1498 1475 1470 1465,1 1460 1450 1440 1410 1408 1406 Amount of line 20 Related to Security Amount of Annual Grant (Sum of lines 2-19) 1502 1495 1492 1490 1485 1430 1415 1411 Amount of line 20 Related to Section 504 Compliance Amount of line 20 Related to LBP Activities Total Non-CGP Funds Contingency (may not exceed 8% of line 20) Relocation Costs Dwelling Equipment - Nonexpendable Dwelling Structures Site improvement Mod Used for Development Moving to Work Demonstration Nondwelling Equipment Nondwelling Structures Site Acquisition Liquidated Damages Audit Administration Management Improvements Replacement Reserve Demoltion Fees and Costs Operations Summary by Development Account □ Reserve for Disasters/Emergencies 1/13/2010 X Signature of Public Housing Director/Office of Native American Programs Administrator and Date Final Performance and Evaluation Report Revised Annual Statement/Ravision Number D Original 5911,142 Total Estimated Cost 236,972 206,013 65,907 53,000 182,229 31,450 81.114 40,000 4,458 0 Revised \$911,142 236,540 210,038 64,313 182,228 91,114 40,000 29,450 53,000 4,458 TN37P006501-08 Obligated 53,000 911,142 238,540 210,038 Total Actual Cost " 40,000 64,313 182,229 4,458 29,450 91,114 Expended 119,121 210,038 182,229 744,785 41,589 36,752 29,450 91,114 4,458 30,034

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

^{*} To be completed for the Performance and Evaluation Report.

Canada Passessidos of Union	Tourisment		Total Estin	nated Cost	Total	10
General Description of Major Work Categories	Development Account Number	Cuartty	Original	Revised 1	Obliga	ds hed ³
Operations	1406		182,229	182,229	182,229	
			216 516	44 044	41.054	
Mina Carolina	Other C		8.400	8 600	8.600	
nt Fraining	1408		5,000	3,129	3,129	
nt Indtiatives Manager	1408		42,000	41,838	41,335	
nt Indiatives Supplies	1408		2,000	1,350	1,500	
int Training	1408		5,208	5,208	5,208	
erical Assistant	1400		12,000	3,844	3,844	
UPCS Impection/Services Talecomm/Computer Upgrades/Security	1408		1,000	922	922	_
Cameras	1408		100,000	85,473	85,473	_
nt Business Development	1408		1,000	0		_
AVAC Technical/Services	1408		1,000	0		_
Audit	1406		17,500	17,500	17,500	-
			236,972	210,038	210,03	00
Administration	1410		91,114	91,114	91,114	
			\$91,114	\$91,114	\$91,114	1-1
A and € Fees PHA Wide	1430		28,000	28,000	28,000	_
Impedor / Employee Benefita	1430		25.000	25,000	25,000	_
			\$53,000	\$53,000	\$53,000	\rightarrow
MaintRigt Vehicle	1476	10	40,000	40,000	40,000	
			\$40,000	\$40,000	140,000	1-1
	General Description of Major Vista Workers Vista Workers Vista Workers Vista Workers Vista Office Supplien Resident Instantives Manager Resident Instantives Supplies MgcMaint Training CFFICIencal Assistant UPCS Imapection/Services Telecontra/Computer Upgrades/Security Converss Resident Business Development HVAC Technical/Services Energy Audit Administration Administration Administration Administration Administration Administration Administration Administration MaintMgt Vielicie	Vicas Caregores Vicas Caregores Supplies Supplies Supplies Caregores Assistant Assistant Computer Upgradee/Security Sustness Development Incal/Services 8 Employee Benefits Employee Benefits	reacal Description of Major Development Vitors Categories Number 1406 Supplies 1406 Supplies 1406 Indiantives Manager 1408 Indiantives Supplies 1408 Computer Upgrades/Security 1408 Sustiness Development 1408 In 140	Vitoric Categories Development Account Vitoric Categories Account Vitoric Categories 1406 1406 1406 1406 1406 1406 1406 1406	Trail Estimated Correct Chartsy Viete Categories Chartsy Viete Categories Chartsy Chiginal Ravi Chartsy Chiginal Ravi Chiginal Chiginal Ravi Chiginal Chigina	Trail Estimated Cost

Tarry W Currington, Execute Director
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Page 2 of 4

³ To be completed for the Performance and Evaluation Report.

Terry W Currengham, Executive Dilector

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Annual Statement /Performance and Evaluation Report Capital Fund Program (CFP) Part III: Implementation Schedule

US Department of Housing and Urban Development

CMB Approval No. 2577 - 0157 (Exp. 3/31/2002).

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Terry W.Curreligham, Explains Director

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Page 4 of 4

Annual Statement /Performance and Evaluation Report Capital Fund Program (CFP) Part I: Summary

US Department of Housing or and Urban Development Office of Public and Indian Housing

OMB Approval No. 2577 - 0157 (Exp. 3/31/2002)

Kingsport Housing & Redevelopment Authority PO Box 44 Kingsport, TN 37662			Captal Fund Number TN37P906501-09
nnual Statement	☐ Revised Annual Statement/Revision Number C	Number C	
on Report fo	Final Performance and Evaluation Report	port	
	Total Estimated Cost	d Cost	Total Actual Cost
Line No. Summary by Development Account	Original	Revised 1	Obligated
Total Non-CGP Funds	+		386
1406 Operations			
	44,900	42,400	42,400
1410 Administration	40		
1411 Audit	4		
1415 Liquidated Demages			
1430 Fees and Costs	10,500	\$10,500	\$10,500
1440 Site Acquisition	+		
1450 Site improvement	20,000	20,000	20,000
	112,497	112,497	112,497
1465.1	8,333	7,333	7,333
	189,004	*	
1475	2		
1485	+		
	+		
1492			
1495.1 Relocation Costs	+		
	+		
1502	+		
Amount of Annual Grant (Sum of lines 2-19)	\$365,234	192,730	192,730
21 Amount of line 20 Related to LBP Activities			
Amount of line 20 Related to Section 504 Compliance			
Amount of line 20 Related to Security			
The state of the s			

Terry W. Carlingham, Executive Director
To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

[&]quot;To be completed for the Performance and Evaluation Report.

Terry W Currenghan, Execute Director
To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
To be completed for the Performance and Evaluation Report.

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Annual Statement /Performance and Evaluation Report Capital Fund Program (CFP) Part II: Supporting Pages

US Department of Housing and Urban Development Office of Public and Indian Housing

CMB Approval No. 3577 - 0107 (Exp. 3/31/2002)

Signature of Executive Director and Date		Comm Buildin			TN 37P000001				Equipment								95	HA-Wide	Development	
Director and Date		Comm Buildings & Offices Expansion / Renovations / Unexpected Needs		Replace HVAC	Install Covers over Crawispace Entrances		HVAC Equipment	Emergency Mod Abeleneys	ADA Modifications	Refrigerators		Playground improvements	Pest Control	Fance Rapers	Sidewalka/Parking Lots/Alleys/Streets	Candacating Candacating		General Description of Major Work Categories		
		1470		1460	1480		1465.1	1465	1405.1	1405.1		1450	1450	1450	1450	1450	Number	Development Account		
4/42/2044 N																		Quantity	-	
Signature of Public H	169,004	169,004	112,497	112,497	0	6,333	500	900	500	0,333	20,000	1,000	1,000	1,000	1,000	8,000		Original	Total Esti	
ousing Director/Dffice	0		112,487	112,497	0	7,333	500	0	500 0	6,333	20,000	1,000	1,000	1,000	1,000	8,000	2 0000	Revised *	Total Estimated Cost	Crisco of a contract of the co
of Native American Pix	0		112,497	112,497	0	7,333	500	0	000	6,333	20,000	1,000	1,000	1,000	1,000	8,000	Opplysis	Funds	Total Ac	STATE STATE STATE
Signature of Public Housing Director/Office of Native American Programs Administrator and Date	0	•	112,457	112,497	0	\$6,468	0	0	410	0,050	\$1,027	139	0	0	688	0 (- coords	Funds	Total Actual Cost	
1 Date																		many or respondent reason	Status of Donnard Mark 1	

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Annual Statement /Performance and Evaluation Report Capital Fund Program (CFP) Part III: Implementation Schedule

US Department of Housing and Urban Development

OMB Approvel No. 2577 - 0157 (Eqs. 3/31/2002)

X To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Capital Fund Program (CFP) Part I: Summary Annual Statement /Performance and Evaluation Report

Kingsport Housing & Redevelopment Authority

and Urban Development **US Department of Housing**

OMB Approval No. 2577 - 0157 (Exp. 3/31/2002)

Office of Public and Indian Housing

Capital Fund Number

FFY of Grant Approval

DOrganal Ani	COngresi Annual Statement	Revised Annual Statement/Revision Number C	umber C	Indirectors	2000
Perform	ation Report for Program Year Ending 9/30/2010		4		
		Total Estimated Cost	d Cost	Total Actual Cost 2	Cost 2
Line No.	Summary by Development Account	Original	Revised 1	Obligated	Expended
1	Total Non-CGP Funds				
2	1406 Operations				
ω	1408 Management Improvements	44,900	42,400	42,400	21,545
4	1410 Administration	+			
cs.	1411 Audit				
Ф	1415 Liquidated Damages				
7	1430 Fees and Costs	10,500	\$10,500	\$10,500	\$3,527
8	1440 Site Acquisition			A CANADA	
9	1450 Site Improvement	20,000	20,000	20,000	\$1,027
10	1460 Dwelling Structures	50,903	227,407	\$227,407	
11	1465.1 Dwelling Equipment - Nonexpendable	8,333	7,333	7,333	\$6,468
12	1470 Nondwelling Structures	3,811	3,811	3,811	3,811
13	1475 Nondwelling Equipment	4			
14	1485 Demolition	*			
15	1490 Replacement Reserve	40			
16	1492 Moving to Work Demonstration	A			
17	1495.1 Relocation Costs	4.0			
18	1498 Mod Used for Development	+			
19	1502 Contingency (may not exceed 8% of line 20)	4:			
20	Amount of Annual Grant (Sum of lines 2-19)	\$138,447	311,451	311,451	36,778
21	Amount of line 20 Related to LBP Activities	+			
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				
24	Amount of line 20 Related to Energy Conservation Measures				
				The state of the s	

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Teny W. Curningham, Exactive Director
To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

^{*} To be completed for the Performance and Evaluation Report.

Annual Statement /Performance and Evaluation Report Capital Fund Program (CFP) Part II: Supporting Pages

US Department of Housing and Urban Development

ONS Approval No. 2577 - 0157 (Exp. 3/51/2002)

Visia Werkern Visia Werkern Visia Werkern Visia Werkern Visia Werkern Visia Werkern Visia Office Supplies Visi	Development Mandar / Name	General Description of Major	2	Quantity	Total Estimated Cost	neted Cost	Total Actual Con	
ts Vista Workers Vista Cifice Supplies Resident Indiatives Managar Resident Indiatives Managar Resident Indiatives Managar Resident Indiatives Managar Resident Indiatives Supplies MayMaint Training UPCS inspectionServices TelecommiComputer Upgradian/Security Camerias Resident Builvius Development 1408 Resident Builvius Security 1408 Resident Builvius Security 1408 Resident Training 1408 1408 1408 Resident Indiatives Managar 1408 Resident Indiatives Managar 1408 Resident Training 1408 1408 1408 Resident Training 1408 1408 1408 Resident Indiatives Managar 1408 Resident Training 1408 1408 1408 Resident Training 1408 1408 1408 Resident Training 1408 1408 1408 Resident Indiatives Managar 1408 Resident Indiatives Managar 1408 1408 1408 Resident Training 1408 1408 1408 Resident Training 1408 1408 Resident Training 1408 1408 Resident Training 1408 1408 Resident Training 1408 Resident Training 1408 1408 Resident Training 1408 Resident Training 1408 1408 1408 Resident Training 1408 1408 Resident Training 1408 Resi	Number / Name HA-Wide Activities	General Description of Major Whork Categories		Appe	Original	Revised		Funds Obligated ²
tus Visita Office Supplies 1400 13,300 Visita Office Supplies 1400 1,300 Resident Initiatives Manager 1408 1,000 Resident Initiatives Supplies 1408 1408 MgtMAint Training 1408 1408 UPCS Inspection/Services 1408 1,500 Telecomm/Computer Upgradent/Security 1408 500 Resident Business Development 1408 500 HVAC Tochnical/Services 1408 500 Long Term Asset Management Plan 1408 500 Salary Wage Sturty 1408 1,000 Salary Wage Sturty 1409 1,000 Tech Serv Ling Term Asset Mgt Plan 1430 10,000 Tech Serv Ling Term Asset Mgt Plan 1430 500	CBVERS		Number	ŀ			CERTAIN	90
In Visita Workers 1400 13,300 Vista Office Supplies 1400 1,300 Resident Initiatives Manager 1406 1,300 Resident Initiatives Supplies 1408 1400 Mg/Maint Training 1408 1408 UPCS Inspectan/Ben/seas Development 1408 1,500 Camerias 1408 1,500 HWAC Tochnical/Services 1408 500 Long Term Asset Management Plan 1408 500 Long Term Asset Management Plan 1409 1,000 Salary Wage Study 1400 1,000 Salary Wage Study 1430 1,000 Tech Serv Ling Term Asset Mgt Plan 1430 10,000 Tech Serv Ling Term Asset Mgt Plan 1430 510,000	PHA-Wide							
Vista Office Supplies 1,000 1,000 Resident Training 1406 1,000 Resident Initiatives Manager 1406 1,000 Resident Training 1406 14,000 UPCS Inspectant/Services 1408 500 Telecomm/Computer Upgradea/Serurify 1408 500 Computer Services 1408 500 Long Term Asset Management Plan 1408 500 Long Term Asset Management Plan 1409 1,000 Salary Wage Study 1400 1,000 Salary Wage Study 1430 1,000 Tech Serv Ling Term Asset Mgt Plan 1430 10,000 Tech Serv Ling Term Asset Mgt Plan 1430 \$10,000		Yata Workers	1408		13,300	13,300		13,300
Resident Initiatives Manager		Nsta Office Supplies	1400	_	1,300	1,300		1,300
Resident Initiatives Manager	-	tesident Training	1408	_	1,800	1,600		1,600
Resident Instatives Supplies MgtMaint Training UPCS Inspection/Benvious Telecomm/Computer Upgrades/Security Carneras Resident Business Development HA08 Long Term Asset Management Plan Tech Serv Ling Term Asset Mgt Plan 1430 Tech Serv Ling Term Asset Mgt Plan 1430 Tech Serv Ling Term Asset Mgt Plan 1430	-	Resident Initiatives Manager	1408		14,000	14,000		14,000
MgtMaint Training UPCS Inspection/Services Telecomm/Computer Upgradew/Security Camerate Resident Business Development HVAC Trothical/Services Long Term Asset Management Plan Salary Wage Study A and E Fees PHA Wide Tech Serv Long Term Asset Mgt Plan 1430	-	tesident Initiatives Supplies	1408	_	600	000		900
UPCS InspectionServices	_	figtMaint Training	1408	_	1,600	1,000		1,600
TelecommicComputer Upgradua/Security 1406 140	-	IPCS Inspection/Services	1408		500	500		5000
#WAC Technical/Sarvices 1408 500 Long Term Asset Management Plan 1408 1,000 Salary Whijin Sturty 1409 1,000 A and E Fees PHA Wide 1430 1430 1430 Tech Serv Long Term Asset Mgt Plan 1430 500 Tech Serv Long Term Asset Mgt Plan 1430 500	0.1	elecomm/Computer Upgrades/Security James 28	1408	_	9,000	8,000		9,000
#WAC Technical/Services 1408 500 Long Term Asset Management Plan 1409 1,000 Satary Wage Study 1,000 1,000 A and E Fees PHA Wate 1430 1430 10,000 Tech Serv Long Term Asset Mgt Plan 1430 500 500	7	esident Business Development	1408		500	500		500
Long Term Asset Management Plan 1409 1,000	-	WWC Technical/Benvioes	1408		500	500		5000
A and E Pees PHA Wide 1430 1000 10000 Tech Serv Ling Term Asset Ngt Plan 1430 500 500 500	-	ong Term Asset Management Plan	1400	_	1,000	1,000		1,000
A and E Pees PHA Wide 1430 10,000 Tech Serv Ling Term Asset Mgt Plan 1430 \$10,000 \$10,000	680	alary Wage Study	1408		1,000	1,000		1,000
A and E Pees PHA Wide Tech Serv Ling Term Asset Mgt Plan 1430 500 \$10,000 \$10,000 \$10,500					44,900	44,900		44,500
		and E Fees PHA Wide ach Serv Long Term Asset Mgt Plan	1430		10,000	10,500		10,500
					\$10,500	\$10,500		\$10,500

X Trany W Carringham. Executed Creator

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* To be completed for the Performance and Evaluation Report.

Development	Some Windship and			Total Estir	Total Estimated Cost	Total Actual Cost	ual Cost
Number / Name HA-Wide Addivises	Garanti Description of Najor Work Categories	Development Account Number	Quartity	Original	Revised 1	Funds Obligated ²	Funds Expended ²
	Neighborhood Appearance	1450		8,000	8,000	0,000	
	Landacaping	1450		8,000	B,000	8,000	
-	Sidewalks/Parking Lots/Alleys/Sireets	1450		1,000	1,000	1,000	
-	Fence Repairs	1450		1,000	1,000	1,000	
-	Past Control	1450		1,000	1,000	1,000	
-	Playground Improvements	1480		1,000	1,000	1,000	
				20,000	20,000	20,000	
PHA Wide	Rafrigerators	1485.1		6,333	6,333	0,330	
	Dumpeter Repair	1465.1		500	0	0	
#	ADA Modifications	1465.1		500	500	500	
	Emergency Wold Abatement	1485.1		500	0	0	
_	HVAC Equipment	1465.1		500	500	500	
			_	8,333	7,333	7,383	
000004	Replace Rooting & Guttering	1460		0	0	227 407	
Cloud	Emergency HVAC Replacements	1400		50,903	227,407	227,407	
				50,903	227,407	\$227,407	
Comm Building	Comm Buildings & Offices Expansion / Renovations / Unexpected Needs						
AMP2 6-4	Cloud Apartmenta	1470		3,811	3,011	3,811	
				3,811	3,811	3,811	
Signature of Executive Director and Data	Paracetar and Parace		011	Total Control of the			

Terry W Centerghald, Executive Develor

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

To be completed for the Performance and Evaluation Report.

Annual Statement /Performance and Evaluation Report Capital Fund Program (CFP) Part III: Implementation Schedule

US Department of Housing and Urban Development

OMB Approval No. 2577 - 0157 (Exp. 3/31/2002)

TN 37P006001 TN 37P006002 Signature of Executive Director and Date TN 37P006009 TN 37P006007 TN 37P006004 TN 37P006003 TN 37P006011 Number/Name HA-Wide Development Activities 1410 1430 1450 1460 1465.1 1470 1476 1406 Original Revised Quarter Ending Date All Funds Obligated 1/12/2011 X Actual Signature of Public Housing Director/Office of Native American Programs Administrator and Date Original Ravised Quarter Ending Date All Funds Expended Office of Public and Indian Housing Actual^e Expend Approved \$ Quarter ending
Obligate 18 mos after available Reasons for Revised Target Dates 2 3 yrs after available

Terry W Curringham, Esscalare Director

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

To be completed for the Performance and Evaluation Report.

Annual Statement /Performance and Evaluation Report Capital Fund Program (CFP) Part I: Summary

US Department of Housing and Urban Development

OMB Approval No. 2577 - 0157 (Exp. 3/31/2002)

PO Box 44 Kingsport, TN 37662 Kingsport Housing & Redevelopment Authority Office of Public and Indian Housing Capital Fund Number TN17P006501-09 FFY of Grant Approval

10 DON 44	an ningsport, in steet			45-100000-1-541	2002
Pr Organ	Original Annual Statement Reserve for Desasters/Emergencies Reformance and Evaluation Report for Program Year Ending 9/30/2010	☐ Revised Annual Statement/Revision Number C ☐ Final Performance and Evaluation Report	0		
		Total Estimated Cost		Total Actual Cost 2	Cost 2
Line No	Summary by Development Account	Original	Revised 1	Obligated	Expended
1	Total Non-CGP Funds				100000000000000000000000000000000000000
2	1405 Operations				200
3	1408 Management Improvements	44,900	45,700	45,700	21,745
4	1410 Administration				
5	1411 Audit				
O)	1415 Liquidated Damages				
7	1430 Fees and Costs	10,500	\$10,500	\$10,500	3,527
8	1440 Site Acquisition	4			
9	1450 Site Improvement	20,000	20,000	20,000	1,027
10	1480 Dwelling Structures	189	189	189	189
11	1465.1 Dwalling Equipment - Nonexpendable	8,333	8,333	8,333	6,489
12	1470 Nondwelling Structures	2,000	2,000	2,000	
13	1475 Nondwelling Equipment		S = 100		
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration	*			
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant (Sum of lines 2-19)	\$85,922	86,722	86,722	33,277
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance	1.			
23	Amount of line 20 Related to Security				
24	Amount of line 20 Related to Energy Conservation Measures	***			
X Signature o	Signature of Executive Director and Date X 7 / 1/2/2011 X	Signature of Public Housing Director/Office of Native American Programs Administrator and Date X	of Native American Progra	ems Administrator and Date	
Tarried Cons	Postodon Francisco				

Teny W. Cunsingham, Exelector
To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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Development Number / Name HA-Wide Activities PHA-Wilde	Gernaria Description of Major Work Categorius	Development Guerely Account Number	- 2		Total Estin Original	Total Estimated Cost Original Revised *	Estina
PHA-Wide Nanagement	Vista Workers	1408		004.01		ne tr	
	Visia Office Supplies	1400		1,400		1,400	1,400 1,400
	Resident Training	1400		1,800		1,800	
	Resident Initiatives Manager	1408		14,000		14,000	20
	Resident initiatives Supplies	1408		000		000	
	MgtWlaint Training	1408		1,800		1,800	
	LIPCS Inspection/Services	1408	-	500		500	
	Telecomm/Computer Upgrades/Security Cameries	1408		9,000		9,000	0
	Rosident Business Development	1408		500		500	
	HVAC Technical/Services	1406		500		500	
	Long Term Asset Management Plan	1408		1,000		1,000	
	Salary Wage Study	1408		1,000		1,000	1,000 1,000
				45,700		45,700	45,700 45,700
PHA-Wide Fees & Costs	A and E Fees PHA Wide Tech Serv Long Term Asset Mgt Plan	1430		10,000		900,000	10,000 10,000 500 500
				\$10,590		\$10,500	\$10,500 \$10,500
Signature of Essecutive Director and	Box Director populate	1/12/2011 X	× Signa	are of Public Ha		Section Description of	Signature of Public Housing Director/Office of Native American Programs Administrator and Date X

Terry W Currengham, Execute Rescor

To be completed for the Petermance and Evaluation Report or a Reviseed Armusi Statement.

To be completed for the Performance and Evaluation Report.

Development		Total Eath	Total Extraoled Cost	Total Ac	Total Actual Cost
Number J Names General Description of Major HA-IMMo Work Catagories Activities	Development Quantity Account Number	2	Revised 1	Funds Obligated ²	Funds
95	MATON			. pacedago	- paprioded
PHA Wide Neighborhood Appearance	1450	8,000	8,000	8,000	
Galewalks/Parking Lobs/Alleys/Streets	1450	1,000	1,000	1,000	
Fence Repairs	1450	1,000	1,000	1,000	
Pest Control	1450	1,000	1,000	1,000	
Playground improvements	1450	1,000	1,000	1,000	
		20,000	20,000	20,000	
PHA Wide Ratigerators	1465.1	6,333	6,333	6,330	
Dwelling Dumpster Repair	1405.1	500	500	500	0
Equipment ADA Modifications	1485.1	500	500	500	
HVAC Equipment	1485.1	500	800	500	
		8,333	trt'9	8,333	6,468
TN 37P086907 Replace WindowSecurity Screens	1400	0	0	0	
Dogwood		0	0	55	
TN 17P01609 Replace Roofing & Guttering Holly Hills	1460	189	188	189	
Comm Buildings & Offices Expension / Renovations / Unixpected Needs					
AMP3 8-7 Degwood Tempoe Apartments	1478	0	0	0	
AMP3 8-9 Holly Hills Apartments AMP3 8-9 Administration Building Titles Citizent	1470	3,000	3,000	0	
		2,900	2,000	2,000	

Tarry W Currenthant, Executive Director

To be completed for the Pforomance and Evaluation Raport or a Rayland Armuni Statement.

To be completed for the Performance and Evaluation Report.

Page 3 of 4

Capital Fund Financing Program Capital Fund Program, Capital Fund Replacement Housing Factor and Annual Statement /Performance and Evaluation Report

Office of Public and Indian Housing and Urban Development US Department of Housing

OMB Approval No. 2577 - 0228 (Exp. 4/30/2011)

Kingspo PO Box 44	port I	Kingsport Housing & Redevelopment Authority PO Box 44 Kingsport, TN 37662			Capital Fund Number tn00600000409r	FFY of Grant Approval 2009
D Origina	3	Original Annual Statement D Reserve for Disasters Emergencies	Revised Annual Statement/Revision Number B	Number B		
e Perform	unce an	xi Report for Program Year Ending 9/30/10	Final Performance and Evaluation Report			
l ing No			Total Estimated	Cost Revised 1	Total Actual Cost * Obligated	al Cost " Expended
-	1					
3 -	1 16301	Ideal Non-Corr runds				
-	1406	Operations				
w	1408	Management Improvements		98 400	78 190	*
4	1410	Administration	86,731	10,107	001,00	
cs.	1411	Audit				
6	1415	Liquidated Damages			2000	8000
7	1430	Fees and Costs	86,731	25,095	center	near
8	1440	Site Acquisition				
9	1450	Site Improvement				
10	1460	Dwelling Structures				
11	1465.1	-1			200 1 000	782 080
12	1470	Nondwelling Structures	693,845	764,022	220,407	100/000
13	1475	Nondwelling Equipment	*			
14	1485	Demoition				
15	1490	Replacement Reserve	4	,		
16	1492	Moving to Work Demonstration		,		
17	1495.1					
18	1498	Mod Used for Development				
19	1502	Contingency (may not exceed 8% of line 20)			2007 007	000 000
20	Amou	Amount of Annual Grant (Sum of lines 2-19)	\$867,307	\$867,307	3007,307	and in the
21	Amou	Amount of line 20 Related to LBP Activities	+			
22	Amoun	Amount of line 20 Related to Section 504 Compliance				
23	Amoun	Amount of line 20 Related to Security				
24	Amou	Amount of line 20 Related to Energy Conservation Measures	+			
Signature of	Executi	Signature of Executive Director and Date	Signature of Public Housing Director/Office of Native American Programs Administrator and Services	Office of Native American Proj	Julius Administrator and Saw	
×		1/13/2017	×			

July.

Terry W. Curningham, Executive Director

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

[&]quot;To be completed for the Performance and Evaluation Report.

	PHA-Wide Fees & Costs		PHA-Wide Administration		Number / Name HA-Wide Activities	Development
	A and E Fees PHA Viide		Administration		General Description of Major Work Categories	
	1430		1410		Development Account Number	
					Quantity	
\$86,731	86,731	\$86,731	86,731		Original	Total Esti
\$26,098	25,095	\$78,190	78,190		Revised [†]	Total Estimated Cost
\$25,096	25,095	\$0	0		Funds Obligated ²	Total Ac
\$5,000	6,000	\$0	0		Funds Expended ²	Total Actual Cost
					Status of Proposed Work	Claha of Donnand Work 2

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement

To be completed for the Performance and Evaluation Report.

OMB Approval No. 2577 - 0226 (Exp. 4/30/2011)

San San a Residence a prim a soundary	a tolkinini			Contract of the second of the second				
Development				Total Esti	mated Cost	Total Au	tual Cost	
Number / Name HA-Wide Advilles	General Description of Major Work Categories	Development Account Number	Quantity	Original	Revised 1	Funds Obligated ²	Funds Expended ²	Status of Proposed Work

			Riverview		TN006000005 Riverview	Number / Name HA-Wide Adfylles	WINDLINGS DAY
			Install Geothermal HVAC Systems		Solar Panel Farm (on top of Community Center)	General Description of Major Work Catagories	
1470	20000		1470		1470	Development Account Number	
						Quantity	
693,845	000,000	100,000	390,000	303,845	303,845	Original	The party of the last of the l
764,022	500,004	300 000	369,984	394,038	394,038	Revised ¹	-
764,022	-	369 984	369,964	394,038	394,038	Funds Obligated 2	
360,587		350.567	350,567	0		Funds Expended ²	
						Status of Proposed Work	The state of the s

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
² To be completed for the Performance and Evaluation Report.

Annual Statement /Performance and Evaluation ReporUS Department of Housing Capital Fund Program, Capital Fund Replacement Housing Fand Urban Development Capital Fund Financing Program

Office of Public and Indian Housing

OMB Approval No. 2577 - 0226 (Exp. 4/30/2011)

	TN006000001 TN006000002 TN006000003 TN006000004	1470 1475	1460 1460	1410	1406 1408	Activities	Development All F Number/Name Qua
+						Original	η Ν
						Revised 1	All Funds Obligated Quarter Ending Date
						Actual*	ated Date
						Original	Qu
						Revised	All Funds Expended Quarter Ending Date
						Actual	Date
Approved \$ Obligate Expend						Ī	71
Quarter ending 18 mos after available 3 yrs after available							Reasons for Revised Target Dates 2
							N

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Capital Fund Financing Program Capital Fund Program, Capital Fund Replacement Housing Factor and Annual Statement /Performance and Evaluation Report

Office of Public and Indian Housing and Urban Development US Department of Housing

OMB Approval No. 2577 - 0228 (Exp. 4/30/2011)

Kingspo PO Box 44	port I	Kingsport Housing & Redevelopment Authority PO Box 44 Kingsport, TN 37662			Capital Fund Number tn00600000409r	FFY of Grant Approval 2009
D Origina	3	Original Annual Statement D Reserve for Disasters Emergencies	Revised Annual Statement/Revision Number B	Number B		
e Perform	unce an	xi Report for Program Year Ending 9/30/10	Final Performance and Evaluation Report			
l ing No			Total Estimated	Cost Revised 1	Total Actual Cost * Obligated	al Cost " Expended
-	1					
3 -	1 16301	Ideal Non-Corr runds				
-	1406	Operations				
w	1408	Management Improvements		98 400	78 190	*
4	1410	Administration	86,731	10,107	001,00	
cs.	1411	Audit				
6	1415	Liquidated Damages			2000	8000
7	1430	Fees and Costs	86,731	25,095	center	near
8	1440	Site Acquisition				
9	1450	Site Improvement				
10	1460	Dwelling Structures				
11	1465.1	-1			200 1 000	782 080
12	1470	Nondwelling Structures	693,845	764,022	220,407	100/000
13	1475	Nondwelling Equipment	*			
14	1485	Demoition				
15	1490	Replacement Reserve	4	,		
16	1492	Moving to Work Demonstration		,		
17	1495.1					
18	1498	Mod Used for Development				
19	1502	Contingency (may not exceed 8% of line 20)			2007 007	000 000
20	Amou	Amount of Annual Grant (Sum of lines 2-19)	\$867,307	\$867,307	3007,307	and in the
21	Amou	Amount of line 20 Related to LBP Activities	+			
22	Amoun	Amount of line 20 Related to Section 504 Compliance				
23	Amoun	Amount of line 20 Related to Security				
24	Amou	Amount of line 20 Related to Energy Conservation Measures	+			
Signature of	Executi	Signature of Executive Director and Date	Signature of Public Housing Director/Office of Native American Programs Administrator and Services	Office of Native American Proj	Julius Administrator and Saw	
×		1/13/2017	×			

July.

Terry W. Curningham, Executive Director

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

[&]quot;To be completed for the Performance and Evaluation Report.

	PHA-Wide Fees & Costs		PHA-Wide Administration		Number / Name HA-Wide Activities	Development
	A and E Fees PHA Viide		Administration		General Description of Major Work Categories	
	1430		1410		Development Account Number	
					Quantity	
\$86,731	86,731	\$86,731	86,731		Original	Total Esti
\$26,098	25,095	\$78,190	78,190		Revised [†]	Total Estimated Cost
\$25,096	25,095	\$0	0		Funds Obligated ²	Total Ac
\$5,000	6,000	\$0	0		Funds Expended ²	Total Actual Cost
					Status of Proposed Work	Claha of Donnand Work 2

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement

To be completed for the Performance and Evaluation Report.

OMB Approval No. 2577 - 0226 (Exp. 4/30/2011)

San San a Residence a prim a soundary	a tolkinini			Contract of the second of the second				
Development				Total Esti	mated Cost	Total Au	tual Cost	
Number / Name HA-Wide Advilles	General Description of Major Work Categories	Development Account Number	Quantity	Original	Revised 1	Funds Obligated ²	Funds Expended ²	Status of Proposed Work

			Riverview		TN006000005 Riverview	Number / Name HA-Wide Adfylles	WINDLINGS DAY
			Install Geothermal HVAC Systems		Solar Panel Farm (on top of Community Center)	General Description of Major Work Catagories	
1470	20000		1470		1470	Development Account Number	
						Quantity	
693,845	000,000	100,000	390,000	303,845	303,845	Original	The party of the last of the l
764,022	500,004	300 000	369,984	394,038	394,038	Revised ¹	-
764,022	-	369 984	369,964	394,038	394,038	Funds Obligated 2	
360,587		350.567	350,567	0		Funds Expended ²	
						Status of Proposed Work	The state of the s

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
² To be completed for the Performance and Evaluation Report.

Annual Statement /Performance and Evaluation Repor US Department of Housing

OMB Approval No. 2577 - 0226 (Exp. 4/30/2011)

Capital Fund Program, Capital Fund Replacement Housing Fand Urban Development
Capital Fund Financing Program
Office of Public and Indian Office of Public and Indian Housing

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Annual Statement/Performance and Evaluation Report Capital Fund Financing Program

PHA Name: Kingsp Redevelopment Aut AMP 1 Lee Apartments	PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP Lee Apartments	Grant Type and Number Capital Fund Program Grant No: TN37P00650110 Replacement Housing Factor Grant No: Date of CFFP:	0650110			FFY of Grant Approval:
Type of Grant Original A	pe of Grant Original Annual Statement	☐ Reserve for Disasters/Emergencies		Revised Annual Statement (revision no: A	ised Annual Statement (revision no: A)	
I inc	Summary by Development Account	line Summary by Development Assount		Total Estimated Cost		Total Actual Cost
1	manufacture for Communication	T STOCK OF S	Original	Revised	Obligated	Expended
-	Total non-CFP Funds		2000,000,000			
2	1406 Operations (may not exceed 20% of line 21) a	ceed 20% of line 21) *				
3	1408 Management Improvements	nents	44,900	44,900	44,900	3069
4	1410 Administration (may not exceed 10% of line 21)	ot exceed 10% of line 21)				25 1 1 1 1 2 2 2 1 1 1 1 1 1 1 1 1 1 1 1
U	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs		10,500	10,500	10,500	10,574
96	1440 Site Acquisition					
9	1450 Site Improvement		20,000	20,000	20,000	0
10	1460 Dwelling Structures		199,804	6,000	6,000	0
11	1465.1 Dwelling Equipment—Nonexpendable	-Nonexpendable	6,000	6,000	6,000	0
12	1470 Non-dwelling Structures	W	101,000	1,000	1,000	1,000
13	1475 Non-dwelling Equipment	100				
14	1485 Demolition					
15	1492 Moving to Work Demonstration	nstration				
16	1495.1 Relocation Costs					
17	1499 Development Activities *	-				

⁴ To be completed for the Performance and Evaluation Report.
⁴ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
⁵ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

^{*}RHF funds shall be included here.

Capital Fund Financing Program Capital Fund Program, Capital Fund Program Replacement Housing Factor and Annual Statement/Performance and Evaluation Report

> U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226

Expires 4/30/2011

Signatu	25	24	23	22	211	20	19	1860	18a		Line	X Peri	Type of t	Part I: Su PHA Name: Kingsport I: and Redeve Authority (I AMP I
re of Exec	Amount of	Amount or	Amount o	Amount o	Amount o	Amount of	1502 Cont	9000 Colli	1501 Coll.		Sammary	огналсе ан	irant jisal Annual	Part I: Summary PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP 1 Lee Apartments
	of line 20 Related to Energy Conservation Measures	fline 20 Related to Security - Hard Costs	if line 20 Related to Security - Soft Costs	Fine 20 Related to Section 504 Activities	if line 20 Related to LBP Activities	of Annual Grant: (sum of lines 2 - 19)	tingency (may not exceed 8% of line 20)	lateralization or Debt Service paid Via System of Direct Payment	Internitization or Debt Service paid by the PHA	485-500 MW-600 MW-600	y by Development Account	d Evaluation Report for Period Ending: 09/30/2010		Grunt Type and Number Capital Fund Program Grant No: TN37P00650110 Replacement Housing Factor Grant No: Date of CFFP:
						382,204				Original			encies	
Signature						00	1			September 1	Fotal Estimat			
of Public Housi						8,400				Revised 1	ed Cost		Revise	7 7
ing Director					201000000000000000000000000000000000000	88,400				Obligated		Final Performance and Evaluation F	ed Annual Statement (revision no:	FFY of Grant 2010 FFY of Grant Approval:
Date						10,574				Expended		Report	J	
	1/17/2011 Signature of Public Housing Director	Amount of line 20 Related to Energy Conservation Measures gnature of Executive Director Tunk (1/13/201) Signature of Public Housing Director	// Date Signature of Public Housing Director	1/17 Pate Signature of Public Housing Director	1/13 Pate Signature of Public Housing Director	1/17 Pate Signature of Public Housing Director	382,204 88,400 88,400 10,574	382,204 88,400 88,400 10,574	382,204 88,400 88,400 10,574	382,204 88,400 88,400 10,574	Original Revised Obligated Experiment	Total Actual Cost Total Actual Cost Experiment	Total Estimated Cost Final Performance and Evaluation Report Total Actual Cost Total Actual Cost Original Revised Obligated Experiment Note Signature of Public Housing Director Signa	Diasters/Emergencies

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

^{*}RHF funds shall be included here.

PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP I Lee Apartments		Grant Type and Number Capital Fund Program Grant No: TN37P00650110 CFFP (Yes/No): No Replacement Housing Factor Grant No:	ETN37P0065011	0	Federal	Federal FFY of Grant: 2010	000	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	inted Cost	Total Actual Cost	Cost	Status of Work
	X			Original	Revised 1	Funds Obligated ²	Funds Expended ²	
PHA-Wide	Vista Workers	1408		13,300	13,300	13,300	2,189	
Management Improvements	Vista Office Supplies	1408		1,300	1,300	1,300	375	
	Resident Training	1408		1,600	1,600	1,600	0	
	Resident Initiatives Manager	1408		14,000	14,000	14,000	0	
	Resident Initiatives Supplies	1408		600	600	600	0	
	Maint/Mgmt Training	1408		1,600	1,600	1,600	0	
	UPCS Inspection Services	1408		500	500	500	0	
	Telecom/Computer/Security Cameras	1408		10,000	10,000	10,000	0	
	Resident Business Development	1408		500	500	500	0	
	HVAC Technical & Equipment	1408		500	500	500	505	
	Long Term Asset Mgmt. Plan	1408		1,000	1,000	1,000	0	
	Subtotal	1408		44,900	44,900	44,900	3069	
	A & E Fees	1430		10,500				
PHA-Wide Fees and Costs	Neighborhood Appearance	1450		8,000	8,000	8,000	0	
PHA-Wide	Landscaping	1450		8,000	8,000	8,000	0	
Appearances	Sidewalks/Alleys/Parking Lots	1450		1,000	1,000	1,000	0	
Approx.	Fence Repairs	1450		1,000	1,000	1,000	0	
	Pest Control/Emergency Extermination	1450		1,000	1,000	1,000	0	
	Playground Improvements	1450		1,000	1,000	1,000	0	
	Subtotal	1450		20,000	20,000	20,000	0	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP I Lee Apartments		Grant Type and Number Capital Fund Program Grant No: TN37P00650110 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	N37790650110		Federal	Federal FFY of Grant: 2010	88
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Est	tal Estimated Cost	Total Actual Cost	Cost
				Original	Revised	Funds Obligated ²	Funds Expended ²
AMP I							
Lee Apartments	Install Covers Over Crawl Spaces	1460		20,000	0	0	0
The state of the s	Replace Commodes/Aerators/Showerheads	1460		5,000	0	0	0
	Replace HVAC	1460		65,200	0	0	0
	Notice Boxes	1460		15,000	0	0	0
	Wall/Floor/Celling Repair	1460		5,000	5,000	5,000	0
Tiffuny Court	Replace Commodes/Aerators/Showerheads	1460		5,000	0	0	0
	Notice Boxes	1460		1,500	0	0	0
	Wall/Floor/Ceiling Repair	1460		1,000	1,000	1,000	0
	Subtotal			199,804	6,000	6,000	0
PHA Wide	Refrigerators	-		4,000	4,000	4,000	0
Dwelling	Dumpster Repairs	1465		500	500	500	0
Equipment	ADA Modifications	1465		500	500	500	0
	Emergency Mold Abatement	1465		500	500	500	0
	HVAC Equipment	1465		500	500	500	0
	Subtotal	1465		6,000	6,000	6,000	0
	Community Bidgs & Offices Expansions/Renovations/Unexpected Needs						
AMP I	6-I Lee Apartments	1470		1,000	1,000	1,000	0
	Parking Lot Expansion						
AMP I	6-1 Lee Apartments	1470		100,000	0	0	0
	Subtotal	1470		101,000	1,000	1,000	0

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP I	g and Redevelopmen	t Authority (TN006)			Federal FFY of Grant: 2010
Development Number Name/PHA-Wide	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter I	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA Wide					

Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report Capital Fund Financing Program Capital Fund Program, Capital Fund Program Replacement Housing Factor and

PHA Name: Kingsp Redevelopment Aut AMP 2/Cloud Ap	PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP 2/Cloud Apartments	Grant Type and Number Capital Fund Program Grant No: TN37P00650110 Replacement Housing Factor Grant No: Date of CFFP:	00650110			FFY of Grant Approval:
Type of Grant Original A	pe of Grant Original Annual Statement	Reserve for Disasters/Emergencies		Revised Annual Statement (revision nocA	ent (revision socA)	
Time of the last	Summers by Development Account	Summers by Development Assount		Total Estimated Cost	d Cour	Total Actual Cost 1
			Original	Revised	Obligated	Expended
-	Total non-CFP Funds			THE PERSON NAMED IN		
2	1406 Operations (may not exceed 20% of line 21) 2	ceed 20% of line 21) 3				
3	1408 Management Improvements	bends	44,900	45,700	45,700	3,068
4	1410 Administration (may not exceed 10% of line 21)	x exceed 10% of line 21)				2000000
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs		10,500	10,500	10,500	10,574
50	1440 Site Acquisition					
9	1450 Site Improvement		20,000	20,000	20,000	0
10	1460 Dwelling Structures		86,104	245,702	245,702	0
11	1465.1 Dwelling Equipment—Nonexpendable	Nonexpendable	6,000	6,000	6,000	0
12	1470 Non-dwelling Structures		1,000	1,000	1,000	1,000
13	1475 Non-dwelling Equipment	nd.				
14	1485 Demolition					
15	1492 Moving to Work Demonstration	estration				
16	1495.1 Relocation Costs					
17	1499 Development Activities *	C.				

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

^{*}RHF funds shall be included here.

Capital Fund Financing Program Capital Fund Program, Capital Fund Program Replacement Housing Factor and Annual Statement/Performance and Evaluation Report

20	25	24	23	22	21	20	3	18ba	188	1	Line	X		A S & S & S B
mature of Ea	Amou	Amou	Amou	Amou	houry	Amou	1502 0			SOUND OF THE PERSON OF T		Performance	Type of Grant Original Ann	PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP 2/Cloud Apartments
1	nt of line 20 Related to Energy Conservation Measures	nt of line 20 Related to Security - Hard Costs	nt of line 20 Related to Security - Soft Costs	nt of line 20 Related to Section 504 Activities	nt of line 20 Related to LBP Activities	nt of Annual Grant: (sum of lines 2 - 19)	Contingency (may not exceed 8% of line 20)	Collateralization or Debt Service paid Via System of Direct Payment	Collineralization or Debt Service paid by the PHA	A CONTRACTOR OF THE CONTRACTOR	mry by Development Account	and Evaluation Report for Period Ending: 09:30/2010		Grant Type and Number Capital Fund Program Grant No: TN37P00650110 Replacement Housing Factor Grant No: Date of CFFP:
1011						168,504				Origin			icles	
Signatu										2	Total Estin			
re of Public Hou						328,819				Revised *	mated Cost		□ Rev	
ising Direc						درا						Final Perfo	ised Annual	FFY of Grant 2010 FFY of Grant Approval:
tor					Contract Con	28,819				Obligated	To	mance and Evaluation F	Statement (revision no:	t Approvat:
Date						13,642				Expended	1.	Report	(A)	
	/ Date / Signature of Public Housing Director	Signature of Public Housing Director	Measures /Date / Date / 1/13/2011 Signature of Public Housing Director	Measures //Date/ //3/2011 Signature of Public Housing Director	Measures /Date / 2011 Signature of Public Housing Director	Measures //Date/ 1/13/2011 Signature of Public Housing Director	168,504 328,819 328,819 13,642	1/3 20/1 Signature of Public Housing Director	168,504 328,819 328,819 13,642 Measures 1/Date 1/3/20/11 Signature of Public Housing Director	#IA tem of Direct 168,504 328,819 328,819 13,642	### Obligated	Total Estimated Cost	### OP:30/2010 Total Estimated Cost	erve for Disasters/Emergencies Revised Annual Statement (revision no: A)

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

PHA Name: Kingsport Housi Authority (TN006) AMP 2/Cloud Apartments	Kingsport Housing and Redevelopment Capital (CFFP (*) Apartments Replace	Grant Type and Number Capital Fund Program Grant No: TN37P00650110 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	e TN37P0065011 rant No:	0	Federal	Federal FFY of Grant: 2010	2010	
Development Number Name/PHA-Wide Activities	General Description of Major Work	Account No.	Quantity	Total Estimated Cost	inted Cost	Total Actual Cost	Cost	Status of Work
	6			Original	Revised 1	Funds Obligated ²	Funds Expended ²	
PHA-Wide	Vista Workers	1408		13,300	13,300	13,300	2,189	
Management Improvements	Vista Office Supplies	1408		1,300	1,300	1,300	375	
	Resident Training	1408		1,600	1,600	1,600	0	
	Resident Initiatives Manager	1408		14,000	14,000	14,000	0	
	Resident Initiatives Supplies	1408		600	600	600	0	
	Maint/Mgmt Training	1408		1,600	1,600	1,600	0	
	UPCS Inspection Services	1408		500	500	500	0	
	Telecom/Computer/Security Cameras			10,000	10,000	10,000	0	
	Resident Business Development			500	500	500	0	
	HVAC Technical & Equipment	1408		500	500	500	505	
	Long Term Asset Mgmt, Plan	1408		1,000	1,000	1,000	0	
	Subtotal			44,900	44,900	44,900	3,069	
PHA-Wide Fees and Costs	A & E Fees	1430		10,500				
PHA-Wide	Neighborhood Appearance	1450		8,000	8,000	8,000	0	
Appearances	Landscaping	1450		8,000	8,000	8,000	0	
Company of the Compan	Sidewalks/Alleys/Parking Lots	1450		1,000	1,000	1,000	0	
	Fence Repairs	1450		1,000	1,000	1,000	0	
	Pest Control/Emergency Extermination	1450		1,000	1,000	1,000	0	
	Playground Improvements	1450		1,000	1,000	1,000	0	
		Subtotal 1450		20,000	20,000	20,000	0	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Authority (TN006) AMP 2/Cloud Apartments		Capital Fund Program Grant No: TN37F00650110 CEFP (Yes/ No): No Replacement Housing Factor Grant No:	N37P00650110					
Development Number Genera Name/PHA-Wide	General Description of Major Work Categories	Development Account No.	Quantity	Total Esti	Total Estimated Cost	Total Actual Cost	Cost	Status of Work
				Original	Revised	Funds Obligated ²	Funds Expended ²	
Cloud Apartments Replace Cor	Replace Commodes/Aerators/Showerheads	1460		12,404	0	0	0	
Replace HVAC	AC	1460		48,700	240,702	240,702	0	
Notice Boxes	es	1460		20,000	0	0	0	
Wall/Floor	Wall/Floor/Ceiling Repair	1460		5,000	5,000	5,000	0	
	Subtotal	1460		86,104	245,702	245,702	0	
PHA Wide Refrigerators	N.	1465		4,000	4,000	4,000	0	
Dwelling Dumpster Repairs	cpairs	1465		500	500	500	0	
	fications	1465		500	500	500	0	
Emergency	Emergency Mold Abatement	1465		500	300	500	0	
HVAC Equipment	ipment	1465		500	500	500	0	
	Subtotal	1465		6,000	6,000	6,000	0	
- Community Expansions	Community Bidgs & Offices Expansions/Renovations/Unexpected Needs							
6-4 Cloud Apartments	spartments	1470		1,000	1,000	1,000	0	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP 2/Cloud Apartments	ig and Redevelopmes	nt Authority (TN006)			Federal FFY of Grant: 2010
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter I	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA Wide					

Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 95 of the U.S. Housing Act of 1937, as amended

Annual Statement /Performance and Evaluation Report Capital Fund Program (CFP) Part I: Summary

US Department of Housing and Urban Development

OMB Approval No. 2577 - 0157 (Exp. 3/31/2002)

PO Box 44 Kingsport, TN 37662 Kingsport Housing & Redevelopment Authority Office of Public and Indian Housing Capital Fund Number TN17P006501-09 FFY of Grant Approval

10 DON 44	an ningsport, in steet			45-100000-1-541	2002
Pr Organ	Original Annual Statement Reserve for Desasters/Emergencies Reformance and Evaluation Report for Program Year Ending 9/30/2010	☐ Revised Annual Statement/Revision Number C ☐ Final Performance and Evaluation Report	0		
		Total Estimated Cost		Total Actual Cost 2	Cost 2
Line No	Summary by Development Account	Original	Revised 1	Obligated	Expended
1	Total Non-CGP Funds				100000000000000000000000000000000000000
2	1405 Operations				200
3	1408 Management Improvements	44,900	45,700	45,700	21,745
4	1410 Administration				
5	1411 Audit				
O)	1415 Liquidated Damages				
7	1430 Fees and Costs	10,500	\$10,500	\$10,500	3,527
8	1440 Site Acquisition	4			
9	1450 Site Improvement	20,000	20,000	20,000	1,027
10	1480 Dwelling Structures	189	189	189	189
11	1465.1 Dwalling Equipment - Nonexpendable	8,333	8,333	8,333	6,489
12	1470 Nondwelling Structures	2,000	2,000	2,000	
13	1475 Nondwelling Equipment		S = 100		
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration	*			
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant (Sum of lines 2-19)	\$85,922	86,722	86,722	33,277
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance	1.			
23	Amount of line 20 Related to Security				
24	Amount of line 20 Related to Energy Conservation Measures	***			
X Signature o	Signature of Executive Director and Date X 7 / 1/2/2011 X	Signature of Public Housing Director/Office of Native American Programs Administrator and Date X	of Native American Progra	ems Administrator and Date	
Tarried Cons	Postodon Francisco				

Teny W. Cunsingham, Exelector
To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

[&]quot;To be completed for the Performance and Evaluation Report.

Development Number / Name HA-Wide Activities PHA-Wilde	Gernaria Description of Major Work Categorius	Development Guerely Account Number	- 2		Total Estin Original	Total Estimated Cost Original Revised *	Estina
PHA-Wide Nanagement	Vista Workers	1408		004.01		ne tr	
	Visia Office Supplies	1400		1,400		1,400	1,400 1,400
	Resident Training	1400		1,800		1,800	
	Resident Initiatives Manager	1408		14,000		14,000	20
	Resident initiatives Supplies	1408		000		000	
	MgtWlaint Training	1408		1,800		1,800	
	LIPCS Inspection/Services	1408	-	500		500	
	Telecomm/Computer Upgrades/Security Cameries	1408		9,000		9,000	0
	Rosident Business Development	1408		500		500	
	HVAC Technical/Services	1406		500		500	
	Long Term Asset Management Plan	1408		1,000		1,000	
	Salary Wage Study	1408		1,000		1,000	1,000 1,000
				45,700		45,700	45,700 45,700
PHA-Wide Fees & Costs	A and E Fees PHA Wide Tech Serv Long Term Asset Mgt Plan	1430		10,000		900,000	10,000 10,000 500 500
				\$10,590		\$10,500	\$10,500 \$10,500
Signature of Essecutive Director and	Box Director populate	1/12/2011 X	× Signa	are of Public Ha		Section Description of	Signature of Public Housing Director/Office of Native American Programs Administrator and Date X

Terry W Currengham, Execute Rescor

To be completed for the Petermance and Evaluation Report or a Reviseed Armusi Statement.

To be completed for the Performance and Evaluation Report.

Development		Total Eath	Total Extraoled Cost	Total Ac	Total Actual Cost
Number J Names General Description of Major HA-IMMo Work Catagories Activities	Development Quantity Account Number	2	Revised 1	Funds Obligated ²	Funds
95	MATON			. pacedago	- paprioded
PHA Wide Neighborhood Appearance	1450	8,000	8,000	8,000	
Galewalks/Parking Lobs/Alleys/Streets	1450	1,000	1,000	1,000	
Fence Repairs	1450	1,000	1,000	1,000	
Pest Control	1450	1,000	1,000	1,000	
Playground improvements	1450	1,000	1,000	1,000	
		20,000	20,000	20,000	
PHA Wide Ratigerators	1465.1	6,333	6,333	6,330	
Dwelling Dumpster Repair	1405.1	500	500	500	0
Equipment ADA Modifications	1485.1	500	500	500	
HVAC Equipment	1485.1	500	800	500	
		8,333	trt'9	8,333	6,468
TN 37P086907 Replace WindowSecurity Screens	1400	0	0	0	
Dogwood		0	0	55	
TN 17P01609 Replace Roofing & Guttering Holly Hills	1460	189	188	189	
Comm Buildings & Offices Expension / Renovations / Unixpected Needs					
AMP3 8-7 Degwood Tempoe Apartments	1478	0	0	0	
AMP3 8-9 Holly Hills Apartments AMP3 8-9 Administration Building Titles Citizent	1470	3,000	3,000	0	
		2,900	2,000	2,000	

Tarry W Currenthant, Executive Director

To be completed for the Pforomance and Evaluation Raport or a Rayland Armuni Statement.

To be completed for the Performance and Evaluation Report.

Page 3 of 4

PHA Nan Redevelop	PHA Name: Kingsport Housing and Redevelopment Authority (TN886)	Grant Type and Number Capital Fund Program Grant No: TN37P00650110 Replacement Housing Factor Grant No: Date of CFFP:	437P00650110 No:			FFY of Grant Approval:
Type of Grant Original A	pe of Grant Original Annual Statement	Reserve for Disasters/Emergencies	2	Revised Annual Statement (revision notA	ual Statement (revision notA)	
Line	Summary by Development Account	line Summers by Development Account		Total Estimated Cost		Total Actual Cost
		100000	Original	Revised ²	Obligated	Expended
-	Total non-CFP Funds					
12	1406 Operations (may not exceed 20% of line 21) a	peed 20% of line 21) *	175,944	153,629	153,629	153,629
Car	1408 Management Improvements	nents	135,500	135,500	135,500	9,205
4	1410 Administration (may not exceed 10% of line 21)	8 exceed 10% of line 21)	87,972	76,815	76,815	76,815
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs		31,500	31,500	31,500	31,722
00	1440 Site Acquisition					
9	1450 Site Improvement		60,000	60,000	60,000	0
10	1460 Dwelling Structures		239,804	261,702	261,702	0
11	1465.1 Dwelling Equipment—Nonexpendable	-Nonexpendable	18,000	18,000	18,000	0
12	1470 Non-dwelling Structures		106,000	6,000	6,000	0
13	1475 Non-dwelling Equipment	п.	25,000	25,000	25,000	0
14	1485 Demolition					
15	1492 Moving to Work Demonstration	nstration				
16	1495,1 Relocation Costs					
17	1499 Development Activities *		96.751			

¹To be completed for the Performance and Evaluation Report,

¹To be completed for the Performance and Evaluation Report or a Revised Annual Statement,

¹PHAs with under 250 units in management may use 100% of CFP Grants for operations.

^{*}RHF funds shall be included here.

Capital Fund Financing Program Capital Fund Program, Capital Fund Program Replacement Housing Factor and Annual Statement/Performance and Evaluation Report

0	Signature of Execu	25	24	23	22	21	20	19	1861	184		1.ine	⊠ Per	Type of Grant Original	PHA Name: Kingsport H and Redevel Authority (T	Part I:
		Amount of line 20 Related to Energy Conservation Mensures	Amount of line 20 Related to Security - Hard Costs	Amount of line 20 Related to Security - Soft Costs	Amount of line 20 Related to Section 504 Activities	Amount of line 20 Related to LBP Activities	Amount of Annual Grant: (sum of lines 2 - 19)	1502 Contingency (may not exceed 8% of line 20)	9000 Collateralization or Debt Service paid Via System of Direct Payment	1501 Collateralization or Debt Service paid by the PHA		Summary by Development Account	Performance and Evaluation Report for Period Ending:	e of Grant Original Annual Statement	PHA Name: Kingsport Housing and Redevelopment Authority (TN006)	Part I: Summary
	Signature of Executive Director													Statement Reserve for Disasters/Entergencies	Grant Type and Number Cupital Fund Program Grant No: TN37P00650110 Replacement Housing Factor Grant No: Date of CFFP: 69/30/2010	
	/ //3 /2011						976,471				Original		91.9	sters/Emergencies		
	Signatu										all	Total Estimated Cost				
	Signature of Public Housing Director						768,146				Revised*	nated Cost		Revised	14	
							768,146				Obligated	ı	Final Performance and Evaluation Report	Revised Annual Statement (revision not A	FFY of Grant Approval:	7010
	Date						271,371				Expenden	TOTAL VEHILL COST	ort			

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

^{*}RHF funds shall be included here.

Part II: Supporting Pages PHA Name: Kingsport Housi Authority (TN006)	orting Pages Kingsport Housing and Redevelopment Capital F (CFFP (Y) Replacen	Grant Type and Number Capital Fund Program Grant No; TN37P00650110 CFFP (Yes/ No); No Replacement Housing Factor Grant No;	: TN37P0065011		Federal	Federal FFY of Grant: 2010	010	
Development Number	General Description of Major Work	Development Account No.	Quantity	Total Estim	Estimated Cost	Total Actual Cost	Cost	Status of Work
	Control Control			Original	Revised	Funds Obligated ²	Funds Expended ²	
PHA-Wide	Operations	1406		175,944	153,629	153,629	153,629	C
Management Improvements	Vista Workers	1408		40,000	40,000	40,000	6,567	
	Vista Office Supplies	1408		4,000	4,000	4,000	1,124	
	Resident Training	1408		5,000	5,000	5,000	0	
	Resident Initiatives Manager	1408		42,000	42,000	42,000	0	
	Resident Initiatives Supplies	1408		2,000	2,000	2,000	0	
	Maint/Memt Training	1408		5,000	5,000	5,000	0	20 10
	UPCS Inspection Services	1408		1,500	1,500	1,500	0	
	Telecom/Computer/Security Cameras	1408		30,000	30,000	30,000	0	
	Resident Business Development	1408		1,500	1,500	1,500	0	
	HVAC Technical & Equipment	1408		1,500	1,500	1,500	1,514	
	Long Term Asset Mgmt, Plun	1408		3,000	3,000	3,000	0	
	Subtotal			135,500	135,500	135,500	9,205	
PHA-Wide Administration	Administration			87,972	76,815	76,815	76,815	0
PHA-Wide Fees and Costs	A & E Fees	1430	1	31,500	31,500	31,500	31,722	C
PHA-Wide	Neighborhood Appearance	1450		24,000	24,000	24,000	0	
Appearances	Landscaping	1450		24,000	24,000	24,000	0	
	Sidewalks/Alleys/Parking Lots	1450		3,000	3,000	3,000	0	
	Fence Repairs	1450		3,000	3,000	3,000	0	
	Pest Control/Emergency Extermination	1450		3,000	3,000	3,000	0	
	Playground Improvements	1450		3,000	3,000	3,000	0	
	Subtotal	1 1450		60,000	60,000	60,000	0	

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

PHA Name: Kingsport Housing and Redevelopment Authority (TN006)		Grant Type and Number Capital Fund Program Grant No: TN37P00650110 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	N37P00650110 t No:		Federal	Federal FFY of Grant: 2010	.010	
Development Number Name/PHA-Wide	General Description of Major Work Categories	Development Account No.	Quantity	Total Est	Total Estimated Cost	Total Actual Cost	Cost	Status of Work
CANTALIANS				Original	Revised	Funds Obligated ²	Funds Expended ²	
AMP I								
Lee Apartments	Install Covers Over Crawl Spaces	1460		20,000	0	0	0	D
*	Replace Commodes/Aerators/Showerheads	1460		5,000	0	0	0	D
	Replace HVAC	1460		65,200	0	0	0	D
	Notice Boxes	1460		15,000	0	0	0	D
	Wall/Floor/Ceiling Repair	1460		5,000	5,000	5,000	0	
Tiffasy Court	Replace Commodes/Aerators/Showerheads	1460		5,000	0	0	0	D
	Notice Boxes	1460		1,500	0	0	0	D
	Wall/Floor/Ceiling Repair	1460		1,000	1,000	1,000	0	
AMP 2				100				
Cloud Apartments	Replace Commodes/Aerators/Showerheads	1460		12,404	0	0	0	D
Company Withouther	Replace HVAC	1460		48,700	240,702	240,702	0	
	Notice Boxes	1460		20,000	0	0	0	D
	Wall/Floor/Ceiling Repair	1460	8	5,000	5,000	5,000	0	
AMP 3	AND THE PERSON NAMED IN COLUMN							
Dogwood Isrrace	Replace Commodes Aeraiors Snowerneaus	1400		2,000	0 0	0 0	0 0	3 0
	Wall/Floor/Colling Repair	1460		5,000	5,000	5,000	0	1
Holly Hills	Replace Commodes/Aerators/Showerheads	1460		5,000	0	0	0	D
The state of the s	Notice Boxes	1460		8,500	0	0	0	D
	Wall/Floor/Ceiling Repair	1460		5,000	5,000	5,000	0	
	Subtotal	1 1460		239,804	261,702	261,702	0	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
² To be completed for the Performance and Evaluation Report.

PHA Name: Kingsport Housing and Redevelopment Authority (TN006)		Grant Type and Number Capital Fund Program Grant No: TN37P00650110 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	IN37P90650110		Federal I	Federal FFY of Grant: 2010	010	
Development Number Name/PHA-Wide	General Description of Major Work Categories	Development Account No.	Quantity	Total Esti	Total Estimated Cost	Total Actual Cost	Cost	Status of Work
100000				Original	Revised 1	Funds Obligated ²	Funds Expended ²	
PHA Wide	Refrigerators	1465		12,000	12,000	12,000	0	
Dwelling	Dumpster Repairs	1465		1,500	1,500	1,500	0	
Equipment	ADA Modifications	1465		1,500	1,500	1,500	0	
	Emergency Mold Abatement	1465		1,500	1,500	1,500	0	
	HVAC Equipment	1465		1,500	1,500	1,500	0	
	Subtotal	al 1465		18,000	18,000	18,000	0	
	Community Bldgs & Offices Expansions/Renovations/Unexpected Needs	5						
AMP I	6-1 Lee Apartments	1470		1,000	1,000	1,000	0	
AMP 2	6-4 Cloud Apartments	1470		1,000	1,000	1,000	0	
AMP 3	6-7 Dogwood Terrace	1470		1,000	1,000	1,000	0	
	6-9 Holly Hills	1470		1,000	1,000	1,000	0	
	6-9 Adm. Bldg Main Office	1470		2,000	2,000	2,000	0	
	Parking Lot Expansion							
AMP I	6-1 Lee Apartments	1470		100,000	0	0	0	
	Subtotal	al 1470		106,000	6,000	6,000	0	
PHA-Wide Non-Dwelling Equipment	Maintenance/Management Vehicles	1475		25,000	25,000	25,000	0	
Development Activities	Replacement Housing Factor	1499		96,751				

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

PHA Name: Kingsport Housing and Redevelopment Authority (TN006)	g and Redevelopmer	it Authority (TN006)			Federal FFY of Grant: 2010
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter)	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA Wide					

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9; of the U.S. Housing Act of 1937, as amended

Part III: Implementation Schedule for Capital Fund Financing Program PHA Name: Kingsport Housing and Redevelopment Authority (TN006)	Development Number Name/PHA-Wide Activities	Obli				
pital Fund Fi evelopment .	All Fund Obligated (Quarter Ending Date)					
nancing Program Authority (TN006)	bligated ling Date)	Actual Obligation End Date				
	All Funds (Quarter E	Original Expenditure End Date				
	All Funds Expended (Quarter Ending Date)	Actual Expenditure End Date				
Federal FFY of Grant: 2010	Reasons for Revised Target Dates					

Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Capital Fund Program, Capital Fund Replacement Housing Factor and Annual Statement /Performance and Evaluation Report

and Urban Development **US Department of Housing**

OMB Approval No. 2577 - 0226 (Exp. 4/30/2011)

Office of Public and Indian Housing

Andrews a street of the street				
Part I: Summary				
Kingsport Housing & Redevelopment Authority			Capital Fund Number TN37P006881-09	FFY of Grant Approval 2009
nnual Statement	Revised Annual Statement/Revision Number A	n Number A		
on Report for Program Year Ending	Final Parlomance and Evaluation Report			
Ins No	Total Estimated Cost	ed Cost Revised 1	Total Actual Cost ² Obligated	usi Cost. ² Expended
Total Non-CGP				200
2 1406 Operations				
3 1408 Management Improvements	9			
4 1410 Administration	115,332	115,332	115,332	115,332
5 1411 Audit				
6 1415 Liquidated Demages			1	+
	80,733	117,681	117,681	117,661
8 1440 Site Acquisition				
9 1450 Site Improvement				
10 1450 Dwelling Structures	957,262	920,314	920,314	920,314
11 1465.1 Dwelling Equipment - Nonexpendable				
12 1470 Nondwelling Structures				
13 1475 Nondwelling Equipment				
14 1485 Demolition		+		
1490				
16 1492 Moving to Work Demonstration				
17 1495.1 Relocation Costs				
18 1498 Mod Used for Development				
	+			
Amount	\$1,153,327	\$1,153,327	\$1,153,327	\$1,153,327
21 Amount of line 20 Related to LBP Activities				
22 Amount of line 20 Related to Section 504 Compliance	,			
Amount of line 20 Related to Energy Conservation	n Measures -			

Terry W. Curningham, Exelutive Director

nt /Performance and Evaluation Report US Department

Development	Development			Total Estimated Cost	sated Cost	Total Actual Cost	ual Cost	
Number / Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Original	Revised 1	Funds Obligated 2	Funds Expended 2	Status of Proposed Work 2
PHA-Wide Administration	Administration	1410		115,332	115,332	115,332	115,332	
				\$115,332	\$116,332	\$116,332	\$115,332	
PHA-Wide Fees & Costs	A and E Fees PHA Vide	1430		80,733	117,681	117,681	117,681	
				\$80,733	\$117,681	\$117,681	\$117,581	

Terry W Cunerigham, Executive Director

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

2 To be completed for the Performance and Evaluation Report.

501-09 ARRA

US Department of Housing and Urban Development

Development	Development		00000000	Total Esti	Total Estimated Cost	Total Ac	Total Actual Cost	Charles of December
Number / Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Onartty	Original	Revised 1	Funds Obligated 2	Funds Expended 2	Stafus of Proposed Work
TN00600001	Replace Roofing & Guttering	1480		286,852	215,000	216,000	216,000	
TN006000012 Cloud	Replace Roofing & Guttering	1460		321,000	324,000	324,000	324,000	
TN006000033 Holly Hills	Replace Window/Security Screens	1460		320,000	290,861	290,861	290,861	
TN006000001 Tiffany Court	Replace Windows	1460		29,400	47,349	47,349	47,349	
TNDOSODOD1	Replace HVAC 36 units	1460			42,104	42,104	42,104	

Terry W.Cuningham, Exputive Director

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

501-09 ARRA

Annual Statement /Performance and Evaluation Repor US Department of Housing Capital Fund Program, Capital Fund Replacement Housing Fand Urban Development Capital Fund Financing Program

Reasons for Revised Target Dates 2 18 mos after available 3 yrs after available Quarter ending Signature of Public Housing Director/Office of Native American Programs Administrator and Date \$ pevoyed \$ Obligate Expend Actual Quarter Ending Date All Funds Expended Original Revised Actual Quarter Ending Date All Funds Obligated Revised Original Signature of Executive Director and Date Number/Name Development HA-Wide Activities 1465.1 1410 1430 1450 1470 1406 1408 1460 1475 TN006000003 TN006000004 TN006000002 TN005000001

Terry W Cunningham, Executive Director
To be completed for the Performance and Evaluation Report or a Revised Annual Statement

1/12/2011

² To be completed for the Performance and Evaluation Report.

Page 4 of 4

501-09 ARRA

17	16	15	4	13	12	Ξ	10	9	56	7	6	SA	4	w	12	-		Line Co.	Type of Grant	PHA Na Redevelo AMP 1.1	Part I:
1499 Development Activities*	1495.1 Relocation Costs	1492 Moving to Work Demonstration	1485 Demolition	1475 Non-dwelling Equipment	1470 Non-dwelling Structures	1465.1 Dwelling Equipment—Nonexpendable	1460 Dwelling Structures	1450 Site Improvement	1440 Site Acquisition	1430 Focs and Costs	1415 Liquidated Dumages	1411 Audit	1410 Administration (may not exceed 10% of line 21)	1408 Management Improvements	1406 Operations (may not exceed 20% of line 21) 3	Total non-CFP Funds		Summary by Development Account	pe of Grant Original Annual Statement	PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP I Lee Apartments/Tiffany Court Replacement Housing Factor Grant No: Date of CFFP:	Part I: Summary
					2,000	5,625	33,234	15,000		7,875				33,875			Original			17900650111 lo:	
																	Revised*	Total Estimated Cost	Revised Annual Statement (revision not Final Performance and Evaluation Report		
																	Obligator	Charles and a	Statement (revision not nee and Evaluation Report		
																	1-4/	Francisco)	FFY of Grant Approval:	FFY of Grant: 2011

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program Annual Statement/Performance and Evaluation Report

Signature of Exec	25 Amou	24 Amou	23 Amou	22 Amou	21 Amou	20 Amou	19 15020	18bii 9000 C	188 1501 0	Line	Let an immented which	Type of Grant Original Annual Statement	PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP 1 Lee Apartments/Tiffany Court	Part I. Summary
Signature of Executive Director	Amount of line 20 Related to Energy Conservation Measures	Amount of line 20 Related to Security - Hard Costs	Amount of line 20 Related to Security - Soft Costs	Amount of line 20 Related to Section 504 Activities	Amount of line 20 Related to LBP Activities	Amount of Annual Grant: (sum of lines 2 - 19)	1502 Contingency (may not exceed 8% of line 20)	9000 Collateralization or Debt Service paid Via System of Direct Payment	1501 Colluteralization or Debt Service paid by the PHA	Summary by Development Account	a di minimi del por e dos e con de monerale.	of Grant Original Annual Statement Describer Disasters/Emergencies	Grant Type and Number Capital Fund Program Grant No: TN37P00650111 Replacement Housing Factor Grant No: Date of CFFP:	
						97,609				Original	Tota	cies		
Signature of Public Housing Director										Revised *	Total Estimated Cost	☐ Revised Am	FY	
Director										Obligated	Total	Revised Annual Statement (revision no: Final Performance and Evaluation Report	FFY of Grant Approval:	
Danc	Date									Expended	Total Actual Cost.			

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

^{*}RHF funds shall be included here.

					Appearances	PHA-Wide	PHA-Wide Fees and Costs												Management Improvements	PHA-Wide		Development Number Name/PHA-Wide Activities	PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP I Lee Apartments/Tiffany Court
Subtotal	Playground Improvements	Pest Control/Emergency Extermination	Fence Repairs	Sidewalks/Alleys/Parking Lots	Landscaping	Neighborhood Appearance	A & E Fees	Subtotal	Long Term Asset Mgmt, Plan	HVAC Technical & Equipment	Resident Business Development	Telecom/Computer/Security Cameras	UPCS Inspection Services	Maint/Mgmt Training	Resident Initiatives Supplies	Resident Initiatives Manager	Resident Training	Vista Office Supplies	Vista Workers			General Description of Major Work Categories	
1450	1450	1450	1450	1450	1450	1450	1430	1408	1408	1408	1408	1408	1408	1408	1408	1408	1408	1408	1408			Development Account No.	Grant Type and Number Capital Fund Program Grant No: TN37P00650111 CFFP (Yes/ No): No Replacement Housing Factor Grant No:
																						Quantity	: TN37P0065011 rant No:
15,000	750	/50	750	750	6,000	6,000	7,875	33,875	750	375	375	7,500	375	1,250	500	10,500	1,250	1,000	10,000		Original	Total Estin	_
																					Revised '	Estimated Cost	Federal
																					Funds Obligated ²	Total Actual Cost	Federal FFY of Grant: 2011
																					Funds Expended ²	Cost	110
																						Status of Work	

¹ To be completed for the Performance and Evaluation Report or 8 Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

						Tiffany Court					Lee Apartments	AMP I		Development Number Name/PHA-Wide Activities	Part II: Supporting rages PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP 1 Lee Apartments / Tiffany Court
					Wall/Floor/Ceiling Repair	Replace Commodes/Aerators/Showerheads	Wall/Floor/Celling Repair	Emergency Water & for Sewer Line Repair - Replacement	Replace HVAC	Replace Commodes/Aerators/Showerheads	Install Covers Over Crawl Spaces			General Description of Major Work Categories	
Subtotal						owerheads		ne Repair -		owerheads				jor Work	Grant Type and Number Capital Fund Program Gra CFFP (Yes' No): No Replacement Housing Fact
1460					1400	1460	1460	1460	1460	1460	1460			Development Account No.	Grant Type and Number Capital Fund Program Grant No: TN37P00650111 CFFP (Yes/ No): No Replacement Housing Factor Grant No:
														Quantity	N37790650111 nt.No:
33,234					1,000	5,000	4,000	3,234	10,000	5,000	5,000		Original	Total Est	
													Revised '	Total Estimated Cost	Federal
													Ohligated ²	Total Actual Cost	Federal FFY of Grant: 2011
													Expended ²	Cost	110
														Status of Work	

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP I Lee Apartments / Tiffany Court	development	Grant Type and Number Capital Fund Program Grant No: TN37P00650111 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	o: TN37P00650111 Frant No:		Federal	Federal FFY of Grant: 2011	110	
Development Number Name/PHA-Wide	General Description of Major Work Categories	k Development Account No.	tl Quantity	Total Esti	Total Estimated Cost	Total Actual Cost	Cost	Status of Work
A SPACE A STREET				Original	Revised 1	Funds Obligated ²	Funds Expended ²	
PHA Wide	Refrigerators	1465		4,000				
Dwelling	Dumpster Repairs	1465		500				
Equipment	ADA Modifications	1465		375				
	Emergency Mold Abatement	1465		375				
	HVAC Equipment	1465		375				
		Subtotal 1465		5,625				
	Community Bldgs & Offices Expansions/Renovations/Unexpected Needs	eeds						
AMP I	6-I Lee Apartments	1470		1,000				
	Parking Lot Expansion			1,000				
AMP I	6-1 Lee Apartments	1470						
		Subtotal 1470		2,000				

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

form HUD-50075.1 (4/2008)

³ To be completed for the Performance and Evaluation Report.

Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)	All Fund Obligated Quarter Ending Date)	All Fund (Quarter F	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA Wide					

Obligation and expenditure and dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Original Obligation Original Expenditure End Date End Date Date Date Original Expenditure End Date Original Expenditure End Date End Date	Part III: Implementation Schedule for Capital Fund Financing Program PHA Name: Kingsport Housing and Redevelopment Authority (TN006) Development Number All Fund Obligated	edule for Capital Funding and Redevelopmen	velopment Authority (TN006) All Fund Obligated	All Fund	All Funds Expended	Federal FFY of Grant: 2011 Reasons for Revise
Original Obligation Original Expenditure End Date Date Date Obligation End Date Date Date	Name/PHA-Wide Activities	(Quarter E	inding Date)	(Quarter Ending Date)	indi	ng Date)
		Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	>	Actual Expenditure End Date
					-	
					1	

Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Annual Statement/Performance and Evaluation Report Capital Fund Financing Program

PHA Na Redevelo AMP 2 C	PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP 2 Cloud Apartments Type of Grant Original Annual Statement	Grant Type and Number Capital Fund Program Grant No: TN37P00650111 Replacement Housing Factor Grant No: Dote of CFFP: Reserve for Disasters/Emergencies	7700650111		☐ Revised Annual Statement (revision no:
Type of Grant Original Ar	pe of Grant Original Annual Statement	Reserve for Disasters/Emergencies			☐ Revised Annual Statement (revision no: ☐ Final Performance and Evaluation Report
Line	Summary by Development Account	Account		П	Total Estimated Cost
	Total non-CFP Funds		Original		Keysed
2	1406 Operations (may not exceed 20% of line 21) 3	acced 20% of line 21)2			
Sat .	1408 Management Improvements	nents	33,875		
4	1410 Administration (may not exceed 10% of line 21)	ot exceed 10% of line 21)	200 10-01 10-0		
Ch	1411 Audit				
6	1415 Liquidated Dunages				
7	1430 Fees and Costs		7,875		
90	1440 Site Acquisition				
9	1450 Site Improvement		15,000		
10	1460 Dwelling Structures		201,234		
Ξ	1465.1 Dwelling Equipment—Nonexpendable	-Nonexpendable	5,625		
12	1470 Non-dwelling Structures	C.	2,000		
13	1475 Non-dwelling Equipment	em	100000000000000000000000000000000000000		
4	1485 Demolition				
15	1492 Moving to Work Demonstration	onstration			
16	1495.1 Relocation Costs				
17	1499 Development Activities *				

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

^{*}RHF thads shall be included here.

Signatu	13	24	23	22	21	20	19	18ba	181		Line	Peri	Type of Grant Original	PHA Name: Kingsport Housing and Redevelopmen Authority (TN996) AMP 2 Cloud Apartments	1,31,11, T
re of Exec	Amount o	Amount o	Amount o	Amount o	Amount o	Amount o	1502 Cont	9000 Colli	1501 Coth		Summary	ormance and	e of Grant Original Annual Statement	PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP 2 Cloud Apartments	Part I: Summary
Signature of Executive Director W. W. 112 11	Amount of line 20 Related to Energy Conservation Measures	Amount of line 20 Related to Security - Hard Costs	Amount of line 20 Related to Security - Soft Costs	Amount of line 20 Related to Section 504 Activities	Amount of line 20 Related to LBP Activities	Amount of Annual Grant: (sum of lines 2 - 19)	1502 Contingency (may not exceed 8% of line 20)	9000 Collateratization or Debt Service paid Via System of Direct Payment	1501 Collatoralization or Debt Service paid by the PHA		Summers by Development Account	Performance and Evaluation Report for Period Ending:	Statement Reserve for Disasters/Emergencles	Grant Type and Number Capital Fund Program Grant No: TN37P00650111 Replacement Housing Factor Grant No: Date of CFFP:	
						265,609				Original	To		neles		
Signature of Public Housing Director										Re	Total Estimated Cost				
lie Housing I										Revised *		Final Perfor	Revised Am	EX of	
Director										Obligated		Final Performance and Evaluation Report	Revised Annual Statement (revision no:	FFY of Grant Approval:	2011
Date										Expended	Total Actual Cost				

⁹ To be completed for the Performance and Evaluation Report.
⁹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
⁹ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

				The second secon	Appearances	PHA-Wide	PHA-Wide Fees and Costs												Management Improvements	PHA-Wide		Development Number Name/PHA-Wide Activities	Part II: Supporting Pages PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP 2 Cloud Apartments
22	Playground Improvements	Pest Control/Emergency Extermination	Fence Repairs	Sidewalks/Alleys/Parking Lots	Landscaping	Neighborhood Appearance	A & E Fees	Sub	Long Term Asset Mgmt. Plan	HVAC Technical & Equipment	Resident Business Development	Telecom/Computer/Security Cameras	UPCS Inspection Services	Maint/Mgmt Training	Resident Initiatives Supplies	Resident Initiatives Manager	Resident Training	Vista Office Supplies	Vista Workers			General Description of Major Work Categories	
Subtotal 1450	1450	1450	1450	1450	1450	1450	1430	Subtotal 1408	1408	1408	1408	cras 1408	1408	1408	1408	1408	1408	1408	1408			ork Development Account No.	Grant Type and Number Capital Fund Program Grant No: TN37P00650111 CFFP (Yes/ No): No Replacement Housing Factor Grant No:
																						Quantity	lo: TN37P006501
15,000	750	750	750	750	6,000	6,000	7,875	33,875	750	375	375	7,500	375	1,250	500	10,500	1,250	1,000	10,000		Original	Total Estin	=
																					Revised '	Estimated Cost	Federal
																					Funds Obligated ²	Total Actual Cost	Federal FFY of Grant: 2011
																					Expended ²	Cost	1103
																						Status of Work	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP 2 Cloud Apartments	and Redevelopment	Grant Type and Number Capital Fund Program Grant No: TN37P00650111 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	o: TN37P00650111 irani No:		Federal F	Federal FFY of Grant: 2011	91	
Development Number Name/PHA-Wide	General Description of Major Work Categories	Work Development Account No.	d Quantity	Total Estimated Cost	nated Cost	Total Actual Cost	Cost	Status of Work
ACHVIICS				Original	Revised 1	Funds Obligated ²	Funds Expended ²	
AMP 2							S	
Cloud Apartments								
	Replace Commodes/Aerators/Showerheads	rheads 1460		5,000				
	Replace HVAC	1460		189,000				
	Emergency Water &/or Sewer Line Repair - Replacement	Repair - 1460		3,234				
	Wall/Floor/Ceiling Repair	1460		4,000				
							Ī	
		Subtotal 1460		201,234				

¹ To be completed for the Performance and Evaluation Report or a Revised Assuul Statement.

² To be completed for the Performance and Evaluation Report.

Development Number Name/PHA-Wide General Description of Major Work Name/PHA-Wide Development Categories Quantity Account No. Total Estimated Cost Total Actual Cost Status of Work Account No. Status of Work Account No. Total Estimated Cost Total Estimated Cost Total Actual Cost Work Account No. Account No. Account No. Total Estimated Cost Total Actual Cost Work Account No. Account No.	PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP 2 Cloud Apartments		Grant Type and Number Capital Fund Program Grant No: TN37P00650111 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	N37P00650111		Federal	Federal FFY of Grant: 2011	011	
Dampster Repairs	Development Number Name/PHA-Wide	General Description of Major Work Categories	Development Account No.	Quantity	Total Estin	nated Cost	Total Actual	Cost	Stati
Refrigerators	Denames					Revised 1	Funds Obligated ²	Funds Expended ²	
Dwelling Dumpster Repairs ADA Modifications Emergency Mold Abatement HVAC Equipment Community Bldgs & Offices Expansions/Renovations/Unexpected Needs Expansions/Renovations/Unexpected Needs Farking Lot Expansion 6-4 Cloud Apartments Subtotal 1470 Parking Subtotal 1470	PHA Wide	Refrigerators	1465		4,000				
Equipment ADA Modifications 1465 Emergency Mold Abatement 1465 HVAC Equipment Subtotal 1465 Community Bldgs & Offices Expansions/Renovations/Unexpected Needs 6-4 Cloud Apartments 1470 Parking Lot Expansion 1470 6-4 Cloud Apartments Subtotal 1470	Dwelling	Dumpster Repairs	1465		500				
Emergency Mold Abatement 1465 HVAC Equipment Subtotal 1465 Community Bldgs & Offices Expansions/Renovations/Unexpected Needs 6-4 Cloud Apartments 1470 Parking Lot Expansion 1470 6-4 Cloud Apartments Subtotal 1470	Equipment	ADA Modifications	1465		375				
HVAC Equipment Subtotal 1465 Community Bldgs & Offices Expansions/Renovations/Unexpected Needs 6-4 Cloud Apartments Parking Lot Expansion 6-4 Cloud Apartments Subtotal 1470 Subtotal 1470		Emergency Mold Abstement	1465		375				
Community Bldgs & Offices Expansions/Renovations/Unexpected Needs 6-4 Cloud Apartments Parking Lot Expansion 6-4 Cloud Apartments Subtotal 1470 Subtotal 1470		HVAC Equipment	1465		375				
Community Bldgs & Offices Expansions/Renovations/Unexpected Needs 6-4 Cloud Apartments Parking Lot Expansion 6-4 Cloud Apartments Subtotal 1470 Subtotal 1470			1465		5,625				
Farking Lot Expansion 6-4 Cloud Apartments 6-4 Cloud Apartments Subtotal 1470 1470		Community Bldgs & Offices Expansions/Renovations/Unexpected Needs							
Parking Lot Expansion 6-4 Cloud Apartments Subtotal 1470 1470	AMP 2	6-4 Cloud Apartments	1470		1,000				
6-4 Cloud Apartments Subtotal 1470 1470		Parking Lot Expansion	100000000000000000000000000000000000000		1,000				
Subtotal 1470	AMP 2	6-4 Cloud Apartments	1470						
			-		2,000				1

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

form HUD-50075.1 (4/2008)

⁷ To be completed for the Performance and Evaluation Report.

PHA Name: Kingsport Housing and Redevelopment Authority (TN006)	ng and Redevelopmer	PHA Name: Kingsport Housing and Redevelopment Authority (TN006)			Federal FFY of Grant: 2011
Development Number Name/PHA-Wide Activities	All Func (Quarter I	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter E	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates 1
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA Wide					

Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Part I: Summary PHA Name: Kingsport Housing and Redevelopment Authority (TN066) AMP 3 Dogwood Terrace/Holly Hills/Admin Bldg – Main Office Type of Grant Storologal Annual Statement	Grant Type and Number Capital Fund Program Grant No: TN37P00650111 Replacement Housing Factor Grant No: Date of CFFP:	7P00650111	Revised Annual State	2
Type of Grant Original Annual Statement Reserve for Disast Performance and Evaluation Report for Period Ending:	Reserve for Disastern/Emergencies		Revised Annual Statement (revision no: Final Performance and Evaluation Report	nt (revision no: Evaluation Report
Line Summary by Development Account	if Account		Total Estimated Cost	The second second
Ц		Original	Revised	Obligated
1 Total non-CFP Funds				
2 1406 Operations (may not exceed 20% of line 21) ^a	exceed 20% of line 21) 3			
3 1408 Management Improvements	ements	33,875		
4 1410 Administration (may not exceed 10% of line 21)	not exceed 10% of line 21)			
5 1411 Audit				
6 1415 Liquidated Dumages				
7 1430 Fees and Costs		7,875		
8 1440 Site Acquisition				
9 1450 Site Improvement		15,000		
10 1460 Dwelling Structures		21,234		
11 1465.1 Dwelling Equipment—Nonexpendable	n-Nonexpendable	5,625		
12 1470 Non-dwelling Structures	res	3,000		
13 1475 Non-dwelling Equipment	nent			
14 1485 Demolition				
15 1492 Moving to Work Demonstration	nonstration			
16 1495.1 Relocation Costs				
17 1499 Development Activities 1	2			

⁴ To be completed for the Performance and Evaluation Report.
⁴ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
⁴ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

[&]quot;RHF funds shall be included here.

Capital Fund Financing Program Capital Fund Program, Capital Fund Program Replacement Housing Factor and Annual Statement/Performance and Evaluation Report

	-		_	_	_		_			_	-	_		
Signatur	25	24	23	22	21	20	19	18h	181		Line	Perfe	Type of Grant Original	Part I: Summary PHA Name: Kingsport Housing and Redevelopment Authority (TN906) AMP 3 Dogwood TerraceHolly Hills/Admin Bldg
e of Exec	Amount of	Amount of	Amount of	Amount of	Amount of	Amount of	1502 Cont	9000 Coffa	1501 Colla		Summary	emance and	or Grant Original Annual Statement	e: Hoesing elopment (TN006) groood offy in Bldg
Signature of Executive Director	Amount of line 20 Related to Energy Conservation Measures	Amount of line 20 Related to Security - Hard Costs	Amount of line 20 Related to Security - Soft Costs	Amount of line 20 Related to Section 504 Activities	Amount of line 20 Related to LBP Activities	Amount of Annual Grant: (sum of lines 2 - 19)	1502 Contingency (may not exceed 8% of line 20)	9000 Collateralization or Debt Service paid Via System of Direct Payment	1501 Collateralization or Debt Service paid by the PHA		Summary by Development Account	Performance and Evaluation Report for Period Ending:		Grant Type and Number Capital Fund Program Grant No: TN37P00650111 Replacement Housing Factor Grant No: Date of CFFP:
1/12/11 Date	asures							n of Direct	4				Reserve for Disasters/Emergencies	650111
						86,609				Original			2	
Signature										nsi	Total Estimated Cost			
Signature of Public Housing Director										Revised ³	ted Cost	O Fina	Rest	
sing Director						7.0					Talenta Inches	d Performance a	sed Annual Stat	FFY of Grant Approval:
										Obligated		☐ Final Performance and Evaluation Report	Revised Annual Statement (revision no:	pprovid:
Date										Expended	Total Actual Cost '			

¹ To be completed for the Performance and Evaluation Report or a Revised Armani Statement.
² To be completed for the Performance and Evaluation Report or a Revised Armani Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

^{*}RHF funds shall be included here.

	Pla	Pe	Fee	Si	Appearances La	PHA-Wide Ne	PHA-Wide A		Lo	H	Re	Te	UI	Ma	Re	Re	Re	Vi	Management Improvements Vi	PHA-Wide		Development Number G Name/PHA-Wide Activities	PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP 3 Dogwood Terrace/Holly Hills/Admin Bldg – Main Office	Part II: Supporting Pages
Carbetal	Playground Improvements	Pest Control/Emergency Extermination	Fence Repairs	Sidewalks/Alleys/Parking Lots	Landscaping	Neighborhood Appearance	A & E Fees	Subtotal	Long Term Asset Mgmt. Plan	HVAC Technical & Equipment	Resident Business Development	Telecom/Computer/Security Cameras	UPCS Inspection Services	Maint/Mgmt Training	Resident Initiatives Supplies	Resident Initiatives Manager	Resident Training	Vista Office Supplies	Vista Workers			General Description of Major Work Categories	dain	
1 1450	1450	1450	1450	1450	1450	1450	1430	1408	1408	1408	1408	s 1408	1408	1408	1408	1408	1408	1408	1408			Account No.	Grant Type and Number Capital Fund Program Grant No: TN37P00650111 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	
																						Quantity	:: TN37P0065011 rant No:	
15,000	750	750	750	750	6,000	6,000	7,875	33,875	750	375	375	7,500	375	1,250	500	10,500	1,250	1,000	10,000		Original	Total Estim	-	
														100				38			Revised 1	Estimated Cost	Federal	
																				ALCOHOLD AND	Funds Obligated ²	Total Actual Cost	Federal FFY of Grant: 2011	
																				CONTRACTOR OF THE PARTY OF	Funds Expended ²	Cost	911	
																						Status of Work		

¹To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

¹ To be completed for the Performance and Evaluation Report.

						6-9 Holly Hills			6-7 Dogwood Terrace	AMP 3		Development Number Name/PHA-Wide Activities	Part II: Supporting Pages PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP 3 Dogwood Terrace/Holly Hills/Admin Bldg – Main Office
					Wall/Floor/Ceiling Repair	Replace Commodes/Aerators/Showerheads	water toors coming Repair	Emergency Water &/or Sewer Line Repair - Replacement	Replace Commodes/Aerators/Showerheads			General Description of Major Work Categories	ing and Redevelopment ace/Holly Hills/Admin
Owner	Subtotal					owerheads		ine Repair -	owerheads			ijor Work	Grant Type and Nu Capital Fund Program CHFP (Yes/ No): No Replacement Housin
	1460				1460	1460	1400	1460	1460			Development Account No.	Grant Type and Number Capital Fund Program Grant No: TN37P00650111 CFFP (Yes/ No): No Replacement Housing Factor Grant No:
												Quantity	N37P00650111
-	21.234				4,000	5,000	4,000	3,234	5,000		Original	Total Esti	
											Revised '	Total Estimated Cost	Federal
											Obligated ²	Total Actual Cost	Federal FFY of Grant: 2011
											Expended ²	Cost	91
											Status of Work		

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ To be completed for the Performance and Evaluation Report.

PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP 3 Dogwood Terrace/Holly Hills/Admin Bldg – Main Office	Development Number Name/PHA-Wide		PHA Wide R	Dwelling D			H		E C	AMP 3 6-	9	9			
Main	General Description of Major Work Categories		Refrigerators	Dumpster Repairs	ADA Modifications	Emergency Mold Abatement	HVAC Equipment		Community Bldgs & Offices Expansions/Renovations/Unexpected Needs	6-7 Dogwood Terrace	6-9 Holly Hills	6-9 Administration - Main Office			
Grant Type and Number Capital Fund Program Grac CFFP (Yes/ No); No Replacement Housing Fact	r Work							Subtotal	ted Needs				Subtotal		
Grant Type and Number Capital Fund Program Grant No: TN37P00650111 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	Development Account No.		1465	1465	1465	1465	1465	1465		1470	1470	1470	1470		
N37P00650111	Quantity														
	Total Es	Original	4,000	500	375	375	375	5,625		1,000	1,000	1,000	3,000		
Federal	tal Estimated Cost	Revised													
Federal FFY of Grant: 2011	Total Actual Cost	Funds Obligated ²	5												
2011	Cost	Funds Expended ²	03												
	Status of Work														

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ To be completed for the Performance and Evaluation Report.

Development Number Name/PHA-Wide All Fund Obligated Activities Original Obligation End Date PHA Wide PHA Wide Actual Obligation Date Actual Date Date Actual Expenditure End Date Actual Expenditure End Date Date PHA Wide	PHA Name: Kingsport Housing and Redevelopment Authority (TN006)	ng and Redevelopmer	t Authority (TN006)			Federal FFY of Grant: 2011
Original Obligation Original Expenditure End Date End Date	Development Number Name/PHA-Wide Activities	All Fund (Quarter E	Obligated nding Date)	All Fund (Quarter I	Is Expended Ending Date)	Reasons for Revised Target Dates
		Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
	PHA Wide					

Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended

PHA Name: Kingsport Housing and Redevelopment Authority (TN006)	Development Number Name/PHA-Wide Activities					
ing and Redevelopme	All Func (Quarter I	Original Obligation End Date				
nt Authority (TN006)	All Fund Obligated (Quarter Ending Dute)	Actual Obligation End Date				
	All Fund (Quarter	Original Expenditure End Date				
	All Funds Expended (Quarter Ending Date)	Actual Expenditure End Date				
Federal FFY of Grant: 2011	Reasons for Revised Target Dates					

Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

	Part I: Summary	PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP 5 Riverview Place	Type of Grant Original Annual Statement Performance and Evaluation	Line Summir	Ц	1 Total non-CFP Funds	2 1406 Ope	3 1408 Management Improvements	4 1410 Adn	5 1411 Audit	6 1415 Liquidated Duniages	7 1430 Fees and Costs	8 1440 Site Acquisition	9 1450 Site Improvement	10 1460 Dwelling Structures	11 1465.1 D		12 1470 Non-dwelling Structures		
		Grant Type and Number Capital Fund Program Grant No: TN3 Replacement Housing Factor Grant N Date of CFFP:	☐ Reserve for Disasters/Emergencies t for Period Endling:	Account			1406 Operations (may not exceed 20% of line 21) a	KERIES	1410 Administration (may not exceed 10% of line 21)							1465.1 Dwelling Equipment—Nonexpendable		THE STATE OF THE S	nstration	1490 Development Activities *
H		7P00650111 ox			Original			33,875	1000			7,875		15,000	4,000	1,125	1,000	- Constitution		
ders/Emergencies			☐ Revised Annual States	Total Estimated Cost	Revised															
######################################			ment (revision no:) d Evaluation Report		Obligated															
######################################		FFY of Grant Approval:		Total Actual Cost 1	Expended															

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Annual Statement/Performance and Evaluation Report Capital Fund Financing Program

Signatur	25	24	23	22	21	20	19	18bg	18a		Line	Perfe	Type of Grant Original	PHA Name: Kingsport Housing and Redevelopmen Authority (TN006) AMP 5 Riverview	Part II Summery
re of Execu	Amount of	Amount of a	Amount of a	Amount of	Amount of	Amount of .	1502 Contin	9000 Collan	1501 Collab		Summary b	rmance and I	e of Grant Original Annual Statement		AJUMUM
Signature of Executive Director	Amount of line 20 Related to Energy Conservation Measures	Amount of line 20 Related to Security - Hard Costs	Amount of line 20 Related to Security - Soft Costs	Amount of line 20 Related to Section 504 Activities	Amount of line 20 Related to LBP Activities	Amount of Annual Grant: (sum of lines 2 - 19)	1502 Contingency (may not exceed 8% of line 20)	9000 Collateralization or Debt Service paid Via System of Direct Payment	1501 Collateralization or Debt Service paid by the PHA		Summary by Development Account	Performance and Evaluation Report for Period Ending:	atement	Grant Type and Number Capital Fund Program Grant No: TN37P00650111 Replacement Housing Factor Grant No: Disc of CFFP:	
Sh.C	nergy Consumati	ecurity - Hard Co	ecurity - Soft Cor	ection 504 Activi	BP Activities	m of lines 2 - 19)	cood 8% of line 2	Service paid Via	Service paid by t		ccount	for Period End	_	umber am Grant No: TN ing Factor Grant I	
	on Measures	818	di	ties			9)	System of Direct	he PHA			ing:	Reserve for Disasters/Emergencies	37P00650111 No:	
Date													ders/Emergencie		
						62,875				Original	2010011		2		
Signature										-	Total Estimated Cost				
Signature of Public Housing Director										Revised ²	rd Cost	□ Flau	Rev		
ising Directo												al Performance:	ised Annual Sta	FFY of Grant 2011 FFY of Grant Approval:	
7										Obligated		☐ Final Performance and Evaluation Report	Revised Annual Statement (revision not	pproval:	
										_	Total Actual Cost	*	J		
Date										Expended					

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^{*}RHF funds shall be included here.

					Appearances	PHA-Wide	PHA-Wide Fees and Costs													Management Improvements	PHA-Wide		Development Number Name/PHA-Wide Activities	PHA Name: Kingsport Housi Authority (TN006) AMP 5 Riverview Place
St	Playground Improvements	Pest Control/Emergency Extermination	Fence Repairs	Sidewalks/Alleys/Parking Lots	Landscaping	Neighborhood Appearance	A & E Fees		S	Long Term Asset Mgmt, Plan	HVAC Technical & Equipment	Resident Business Development	Telecom/Computer/Security Cameras	UPCS Inspection Services	Maint/Mgmt Training	Resident Initiatives Supplies	Resident Initiatives Manager	Resident Training	Vista Office Supplies	Vista Workers			General Description of Major Work Categories	Kingsport Housing and Redevelopment G (006) Ci (006) Right Place
Subtotal 1450	1450	1450	1450	1450	1450	1450	1430	\rightarrow	Subtotal 1408	1408	1408	1408	ameras 1408	1408	1408	1408	1408	1408	1408	1408			Work Development Account No.	Grant Type and Number Capital Fund Program Grant No: TN37F00650111 CFFP (Yes/ No): No Replacement Housing Factor Grant No:
																							ot Quantity	nt No: TN379006501 or Grant No:
15,000	750	750	750	750	6,000	6,000	7,875		33,875	750	375	375	7,500	375	1,250	500	10,500	1,250	1,000	10,000		Original	Total Estim	
								(4														Revised '	I Estimated Cost	Federal
																						Funds Obligated ²	Total Actual Cost	Federal FFY of Grant: 2011
																						Funds Expended ²	Cost	2011
																							Status of Work	

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226 Expires 4/30/2011

	Riverview Place Wall/Floor/Celling Repair 1460		Development Number General Description of Major Work Development Quantity Name/PHA-Wide Categories Account No.	Part III: Supporting Pages PHA Name: Kingsport Housing and Redevelopment Capital Fund Program Grant No: TN37P00650111 Authority (TN006) AMP 5 Riverview Place Replacement Housing Factor Grant No:
	4,000		ity Total Estimated Cost	0111
		Revised ¹	_	Federal FF
		Funds Obligated ²	Total Actual Cost	Federal FFY of Grant: 2011
		Funds Expended ²	Cost	Ĭ
			Status of Work	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
² To be completed for the Performance and Evaluation Report.

form HUD-50075.1 (4/2008)

PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP 5 Riverview Place Development Number General Description	on of Ma	pe am nd Pro s/No)	IN37900650111 nt.No:	Total Estin	Federal F	Federal FFY of Grant: 2011 d Cost Total Actual Co	
Development Number Name/PHA-Wide	General Description of Major Work Categories	k Development Account No.	Quantity	Total Estimated Cost	nated Cost		Total Actual Cost
TWILLIAM STATES				Original	Revised 1		Funds Obligated ²
PHA Wide				7		\rightarrow	
Dwelling	ADA Modifications	1465		375			
Equipment	Emergency Mold Absternent	1465		375			
	HVAC Equipment	1465		375			
		Subtotal 1465		1,125			
	Community Bldgs & Offices Expansions/Renovations/Unexpected Needs	eeds					
AMP 5	Riverview Place	1470		1,000			
	Sub	Subtotal 1470		1,000			

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

form HUD-50075.1 (4/2008)

⁷ To be completed for the Performance and Evaluation Report.

Development Number Name/PHA-Wide Activities Activities Original Obligation End Date PHA Wide PHA Wide All Fund Obligation Actual Obligation Date Original End Date Date PHA Wide Actual Obligation Date PHA Wide Actual Obligation Date PHA Wide Actual Obligation Date Date Actual Expenditure End Date Date Actual Expenditure End Date Date	Part III: Implementation Schedule for Capital Fund Financing Program PHA Name: Kingsport Housing and Redevelopment Authority (TN006)	dule for Capital Fund ng and Redevelopmer	Financing Program nt Authority (TN006)			Federal FFY of Grant: 2011
Original Obligation Original Expenditure End Date Date Date Date Date Date Date Date Date Date Date Date Date Date Date Date Date Date Date Date	Development Number Name/PHA-Wide Activities	All Func (Quarter I	Obligated Ending Date)	All Fund (Quarter I	Is Expended Ending Date)	Reasons for Revised Target Dates
		Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
	PHA Wide					

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9] of the U.S. Housing Act of 1937, as attended.

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17	16	15	I	13	12	П	10	9	00	7	6	58	4	(ci	2	-		Line	Type of Grant Original A Performan	PHA Nan Redevelop	Part I: Summary
1499 Development Activities	1495.1 Relocation Costs	1492 Moving to Work Demonstration	1485 Demolition	1475 Non-dwelling Equipment	1470 Non-dwelling Structures	1465.1 Dwelling Equipment—Nonexpendable	1460 Dwelling Structures	1450 Site Improvement	1440 Site Acquisition	1430 Fees and Costs	1415 Liquidated Durrages	1411 Audit	1410 Administration (may not exceed 10% of line 21)	1408 Management Improvements	1406 Operations (may not exceed 20% of line 21) *	Total non-CFP Funds		Summary by Development Account	pe of Grant Original Annual Statement Original Annual Statement Performance and Evaluation Report for Period Ending:	PHA Name: Kingsport Housing and Redevelopment Authority (TN006)	summary
**		restration		DOM	18	Nonexpendable							at exceed 10% of line 21)	nords	(ceed 20% of line 21) a			Account	Reserve for Disasters/Emergencies t for Period Ending:	Grant Type and Number Capital Fund Program Grant No: TN37P00650111 Replacement Housing Factor Grant No: Date of CFFP:	
TBD				25,000	8,000	18,000	259,702	60,000		31,500			76,815	135,500	153,629		Original		Ü	N37P00650111 r.No:	
																	Revised	Total Estimated Cost	☐ Revised Annual Statement (revision no: ☐ Final Performance and Evaluation Report		
																	Obligated		neut (revision no: d Evaluation Report		
-																	Expended	TOTAL ACTUAL COST		FFY of Grant Approval:	THE AND PARTY OF

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

^{*}RHF funds shall be included here.

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program Annual Statement/Performance and Evaluation Report

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226 Expires 4/30/2011

											_			
Signature	25	24	23	22	21	20	19	18ba 6	180		Line S	Type of Grant Original Performs	PHA Name: Kingsport Housing and Redevelopment Authority (TN006)	Part I: Summary
Signature of Executive Director	Amount of line 20 Related to Energy Conservation Measures	Amount of line 20 Related to Security - Hard Costs	Amount of line 20 Related to Security - Soft Costs	Amount of line 20 Related to Section 504 Activities	Amount of line 20 Related to LBP Activities	Amount of Annual Grant: (sum of lines 2 - 19)	1502 Contingency (may not exceed 8% of line 20)	9000 Collineralization or Debt Service paid Via System of Direct Payment	1501 Colluteralization or Debt Service paid by the PHA		Summary by Development Account	Annual Statement mee and Evaluation Report for Period I	ousing Grant Type and Number Capital Fund Program Grant No: TN37P00650110 Replacement Housing Factor Grant No: Date of CFFP:	imary
1/12/11	100					768,164		Direct				☐ Reserve for Disasters/Emergencies Ending:	110	
Signa						4				Original	Total E			
Signature of Public Housing Director										Revised 3	Total Estimated Cost	□ Revis	22	
ing Director										Obligated	Total Actual Cost	☐ Revised Annual Statement (revision noc) ☐ Final Performance and Evaluation Report	FFY of Grant Approval:	
Date										Expended	12			
	1						1				1			

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
¹ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

^{*}RHF funds shall be included here.

Part II: Supporting Pages PHA Name: Kingsport Hous Authority (TN006)	orting Pages Kingsport Housing and Redevelopment Capi (O06) Rep	Grant Type and Number Capital Fund Program Grant No: TN37P00650111 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	o: TN37P006501	=	Federal	Federal FFY of Grant: 2011	8	
Development Number Name/PHA-Wide Activities	General Description of Major Work	/ork Development Account No.	Quantity	Total Estim	Estimated Cost	Total Actual Cost	Cost	Status of Work
	0			Original	Revised	Funds Obligated ²	Funds Expended ²	
PHA-Wide	Operations	1406		153,629				
Management Improvements	Vista Workers	1408		40,000				
	Vista Office Supplies	1408		4,000				
	Resident Training	1408		5,000				
	Resident Initiatives Manager	1408		42,000				
	Resident Initiatives Supplies	1408		2,000				
	Maint/Memt Training	1408		5,000				
	UPCS Inspection Services	1408		1,500				
	Telecom/Computer/Security Cameras			30,000				
	Resident Business Development	1408		1,500				
	HVAC Technical & Equipment	1408		1,500				
	Long Term Asset Mgmt. Plan	1408		3,000				
	Sut	Subtotal 1408		135,500				
PHA-Wide Administration	Administration	1410		76,815				
PHA-Wide Fees and Costs	A & E Fees	1430		31,500				
PHA-Wide	Neighborhood Appearance	1450		24,000				
Appearances	Landscaping	1450		24,000				
	Sidewalks/Alleys/Parking Lots	1450		3,000				
	Fence Repairs	1450		3,000				
	Pest Control/Emergency Extermination	1450		3,000				
	Playground Improvements	1450		3,000				
		Subtotal 1450		60,000				

^{*}To be completed for the Performance and Evaluation Report or a Revised Annual Statement

² To be completed for the Performance and Evaluation Report.

				4,000		1460	Subtotal	Wall/Floor/Ceiling Repair	Riverview Place
									AMP 5
				4,000		1460		Wall/Floor/Celling Repair	
				5,000		1460	howerheads	Replace Commodes/Aerators/Showerheads	6-9 Holly Hills
				4,000		1460		Wall/Floor/Celling Repair	
				3,234		1460	Line Repair -	Emergency Water &/or Sewer Line Repair - Replacement	
				5,000		1460	howerheads	Replace Commodes/Aerators/Showerheads	6-7 Dogwood Terrace
									AMP 3
				4,000		1460		Wall/Floor/Ceiling Repair	
				3,234		1460	Line Repair -	Emergency Water &/or Sewer Line Repair - Replacement	
				189,000		1460		Replace HVAC	
				5,000		1460	howerheads	Replace Commodes/Aerators/Showerheads	Cloud Apartments
							000		AMP 2
				1,000		1460	The second second second	Wall/Floor/Ceiling Repair	
				5,000		1460	howerheads	Replace Commodes/Aerators/Showerheads	Tiffiny Court
				4,000		1460		Wall/Floor/Ceiling Repair	
				3,234		1460	Repair -	Emergency Water &/or Sewer Repair - Replacement	
				10,000		1460		Replace HVAC	
				5,000		1460	howerheads	Replace Commodes/Aerators/Showerheads	
				5,000		1460	Ses	Install Covers Over Crawl Spaces	Lee Apartments
									AMP I
	Funds Expended ²	Funds Obligated ²	Revised '	Original					
Status of Work	Cost	Total Actual Cost	Total Estimated Cost	Total Est	Quantity	Development Account No.	fajor Work	General Description of Major Work Categories	Development Number Name/PHA-Wide Activities
	011	Federal FFY of Grant: 2011	Federal I		N37P00650111	Grant Type and Number Capital Fund Program Grant No: TN37P00650111 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	Grant Type and Number Capital Fund Program Gra CFFP (Yes/ No): No Replacement Housing Fact	ing and Redevelopment	PHA Name: Kingsport Housing and Rodevelopment Authority (TN006)
								A CONTRACTOR OF THE PARTY OF TH	Part II: Supporting Pages

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages PHA Name: Kingsport Housing and Redevelopment Authority (TN006)		Grant Type and Number Capital Fund Program Grant No: TN37P00650111 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	N37P00650111		Federal	Federal FFV of Grant: 2011	ä	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Esti	Total Estimated Cost	Total Actual Cost	Cost	Status of Work
				Original	Revised 1	Funds Obligated ²	Funds Expended ²	
PHA Wide	Refrigerators	1465		12,000				
Dwelling	Dumpster Repairs	1465		1,500				
Equipment	ADA Modifications	1465		1,500				
0.000	Emergency Mold Abatement	1465		1,500				
	HVAC Equipment	1465		1,500				
	Subtotal	1465		18,000				
	Community Bldgs & Offices Expansions/Renovations/Unexpected Needs							
AMP 1	6-1 Lee Apartments	1470		1,000				
AMP 2	6-4 Cloud Apartments	1470		1,000				
AMP 3	6-7 Dogwood Terrace	1470		1,000				
	6-9 Hally Hills	1470		1,000				
	6-9 Adm. Bldg Main Office	1470		1,000				
AMP 5	Riverview Place	1470		1,000				
	Parking Lot Expansion							
AMP I	6-1 Lee Apartments	1470		1,000				
AMP 3	6-4 Cloud Apartments	1470		1,000				
	Subtotal	1470		8,000				
PHA-Wide Non-Dwelling Equipment	Mnintenance/Management Vehicles	1475		25,000				
Development Activities	Replacement Housing Factor	1499		TBD				

^{*}To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part III: Implementation Schedule for Capital Fund Financing Program PHA Name: Kingsport Housing and Rodevelopment Authority (TN006)	ing and Redevelopme	nt Authority (TN006)			Federal FFY of Grant: 2010
Development Number Name/PHA-Wide Activities	All Fund (Quarter I	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter I	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA Wide					

Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

PHA Name/Number Kingsport Housing & Locality (City/ Redevelopment Authority Work Statement A. Name Work Statement for Year 1 TN6-11 Tiffury Court Locality (City/ Work Statement Work Statement for Year 2 FFY 2012	port Housing & Ind Work Statement for Year 1 Iomes FFY 2011	port Housing & Locality (City/Cou Kingsport, Sullivar and Work Statement Work Statement for Year 2 for Year 1 FFY 2012
Locality (City/ Kingsport, Sull Work Statement for Year 2 FFY 2012	ty/Coe ullivar	Work State) Work Statement for Year 3 FFY 2013 Work Statement for Year 3 FFY 2014 S72,500 S84,702
	County & State) ivan County, TN Work Statement for Year 3 FFY 2013 \$72,500	

PHA Name/Number		Locality (City)	Locality (City/county & State)	Original 5-Year Plan Revision No:	Revision No:
A. Development Number A. and Name	Work Statement for Year 1. FFY	Work Statement for Year 2 FFY	Work Statement for Year 3 FFY	Work Statement for Year 4 FFY	Work Statement for Year 5 FFY
	Annual				
	THE REAL PROPERTY.				
	THE PERSON NAMED IN				

velopment Number/Name Quantity Estimated Cost Development Number/Name Quantity I Description of Major Work 4.000 General Description of Major Work Categories Apartments 5,000 Wall/Floor/Ceiling Repairs 4.000 Replace Storm Doors Oor/Ceiling Repairs 1460 \$9,000 Repair/Replace Baditub Emergency Water/Sewer Line HVAC 10,000 Emergency Water/Sewer Line Repairs 1460 HVAC 10,000 Emergency Water/Sewer Line Repairs 1HVAC 10,000 Emergency Water/Sewer Line Repairs 1HVAC 10,000 Emergency Water/Sewer Line Repairs 1HVAC 10,000 Coll Tiffany Court Wall/Floor/Ceiling Repairs 1HVAC 1,000 Replace Storm Doors Wall/Floor/Ceiling Repairs 1HVAC 1,000 Repairs Wall/Floor/Ceiling Repairs 1HVAC 1,000 Replace Rear Decks 1460 HVAC 1,000 Repairs 1460 HVAC 1,000 Replace Rear Decks 1460	\$54,000	Subtotal of Estimated Cost	Subtotal of	\$31,000	mated Cost	Subtotal of Estimated Cost	
velopment Number/Name Quantity Estimated Cost Development Number/Name Quantity I Description of Major Work Description of Major Work Cattegories 4.000 General Description of Major Genera				\$11,000		1470	The Parties of the Pa
velopment Number/Name Quantity Estimated Cost Development Number/Name Quantity I Description of Major Work Energy Court General Description of Major Cuantity Apartments 4,000 General Description of Major Cork Categories Apartments 5,000 Wall/FloorCeiling Repairs Cork Categories HVAC 4,000 Replace Storm Doors Emergency Water/Sewer Line HVAC 10,000 Emergency Water/Sewer Line 1460 HVAC 1,000 Emergency Water/Sewer Line 1460 HVAL 1,000 Emergency Water/Sewer Line 1460 HVAC 1,000 Emergency Water/Se			ments	5,000		6-11 Tiffuny Court	NOT THE REAL PROPERTY.
velopment Number/Name I Description of Major Work Quantity Estimated Cost. General Description of Major Development Number/Name General Description of Major Quantity Apartments 4,000 6-1 Lee Apartments Work Cattegories Apartments 5,000 Wall/Floor/Ceiling Repairs 6-1 Lee Apartments HVAC 4,000 Replace Storm Doors Emergency Water/Sewer Line HVAC 1,000 Emergency Water/Sewer Line Repairs HVAC 1,000 6-11 Tiffany Court 1460 HVAC 1,000 6-11 Tiffany Court Wall/Floor/Ceiling Repairs HVAC 1,000 6-11 Tiffany Court Wall/Floor/Ceiling Repairs HVAC 1,000 6-11 Tiffany Court Wall/Floor/Ceiling Repairs Wall/Floor/Ceiling Repairs Wall/Floor/Ceiling Repairs 1460 Bundy J Offices Wall/Floor/Ceiling Repairs Wall/Floor/Ceiling Repairs Jons J Ceiling Repairs Wall/Floor/Ceiling Repairs Wall/Floor/Ceiling Repairs			700	5,000		6-1 Lee Apartments	
velopment Number/Name I Description of Major Work Fies Quantity Estimated Cost Development Number/Name General Description of Major Quantity Apartments 4,000 6-1 Lee Apartments Work Categories Apartments 5,000 Wark Categories Major HVAC 4,000 Replace Storm Doors Emergency Water/Sewer Line IVAC 10,000 Emergency Water/Sewer Line HVAC 10,000 Emergency Water/Sewer Line Repairs Wall/Floor/Ceiling Repairs Wall/Floor/Ceiling Repairs Wall/Floor/Ceiling Repairs						Replace Dumpster Surrounds	
velopment Number/Name Quantity Estimated Cost. Development Number/Name Quantity I Description of Major Work I Description of Major Work General Description of Major Work Categories Wall/Floor/Celleger Apartments 4,000 Replace Storm Doors 6-1 Lee Apartments Apartments 4,000 Replace Storm Doors Mall/Floor/Celling Repairs FlVAC 5,000 Replace Storm Doors Emergency Water/Sewer Line FlVAC 10,000 Emergency Water/Sewer Line FlVAC 10,000 Emergency Water/Sewer Line FlVAC 10,000 Emergency Water/Sewer Line Floor/Celling Repairs 1460 Emergency Water/Sewer Line Wall/Floor/Celling Repairs Wall/Floor/Celling Repairs Wall/Floor/Celling Repairs Wall/Floor/Celling Repairs			1460				THE REAL PROPERTY.
Number/Name on of Major Work Quantity Estimated Cost General Development Number/Name General Description of Major Work Categories Development Number/Name General Description of Major Work Categories Quantity s 5,000 6-1 Lee Apartments Work Categories kcpairs 4,000 Replace Storm Doors Wall/Floor/Ceiling Repairs 1460 89,000 Repairs 1460 Repairs 10,000 Repairs 1460 1460 \$11,000 6-11 Tiffany Court Repairs Wall/Floor/Ceiling Repairs Wall/Floor/Ceiling Repairs Wall/Floor/Ceiling Repairs			Replace Rear Decks	1,000		6-1 Lee	
Number/Name Quantity n of Major Work n of Major Work s Repairs 1460 Repairs 1460 Quantity Estimated Cost General Description of Major Work Categories 6-1 Lee Apartments 4,000 Replace Storm Doors Emergency Water/Sewer Line Repairs 1460 S11,000 Repairs Figure Quantity General Description of Major Work Categories 6-1 Lee Apartments Figure Apartments Fig			Wall/Floor/Ceiling Repairs			Community Bidgs / Offices Expansions/ Renovations/ Unexpected Needs	
Number/Name Quantity Estimated Cost Development Number/Name Quantity General Description of Major Work of Major Work Categories s 5,000 Wall/Floor/Celling Repairs 4,000 Replace Storm Doors 4,000 Repairs Bathtub Emergency Water/Sewer Line Repairs 1460 10,000 Fenergency Water/Sewer Line Repairs 1460 10,000 Fenergency Water/Sewer Line Repairs			Repairs Water/Sewer Line	\$11,000		1460	
Number/Name Quantity Estimated Cost Development Number/Name General Description of Major Work of Major Work Categories s			6-11 Tiffany Court	1,000		Wall/Floor/Ceiling Repairs	
Number/Name Quantity Estimated Cost Development Number/Name Quantity General Description of Major Work Sepairs Sepairs 1460 Energency Water/Sewer Line Repairs Repairs 1460 Energency Water/Sewer Line Repairs 1460				10,000		Replace HVAC	
Number/Name Quantity Estimated Cost General Description of Major Work Categories 6-1 Lee Apartments 5,000 Wall/Floor/Ceiling Repairs pairs 1460 S9,000 Repair/Replace Bathtub Emergency Water/Sewer Line Repairs			1460			6-11 Tiffany Court	
Number/Name Quantity Estimated Cost Development Number/Name General Description of Major Work Categories 6-1 Lee Apartments cpairs 4,000 Replace Storm Doors 4,000 Repairs			ncy Water/Sewer Line				
Number/Name Quantity Estimated Cost Development Number/Name General Description of Major Work Categories 6-1 Lee Apartments paging 4,000 Replace Storm Doors			Repair/Replace Bashtub	\$9,000			The state of the s
n of Major Work n of Major Work Stimated Cost Development Number/Name General Description of Major Work Categories 6-1 Lee Apartments Stimated Cost General Description of Major Work Categories			Replace Storm Doors	4,000		Wall/Floor/Ceiling Repairs	Statement
n of Major Work Restimated Cost Development Number/Name Quantity General Description of Major Work Categories 6-1 Lee Apartments			Wall/Floor/Ceiling Repairs	5,000		Replace HVAC	Annual
Quantity Estimated Cost Development Number/Name Quantity General Description of Major Work Categories			6-1 Lee Apartments			6-1 Lee Apartments	Sec
	Estimated Cost	Quantity	Development Number/Name General Description of Major Work Categories	Estimated Cost	Quantity	3.	Year 1 FFY 2011
FFY 2013		FY 2013	I work and w		ent for Year 2 2012	Work Statem FFY	Work Statement for

				THE REAL PROPERTY.	2		STATE OF THE PARTY				T	-				MANUAL PROPERTY.	T.	Statement	Annual	Sec 6	FY	Work Statement for	Part II: Suppo
Subtotal of Estimated Cost				1470	6-1 Lee Apartments	Expansions/Renovations/Unexpected Needs			1460	Wall/Floor/Ceiling Repairs	Replace Vinyl Siding (Porches, Gables, etc.)	Replace Interior Doors	6-11 Tiffany Court	200	1460	Wall/Floor/Ceiling Repairs	Replace Vinyl Siding (Porches, Gables, etc)	Replace Interior Doors	Replace Storm Doors	6-I Lee Apartments	Development Number/Name General Description of Major Work Categories	Work Statement for Year 4 FFY 2014	Part II: Supporting Pages - Physical Needs Work Statement(s)
d Cost																					Quantity	for Year 4	K Stateme
\$66,202				\$1,000	1,000				\$25,702	4,000	16,702	5,000			\$39,500	4,000	25,000	5,000	5,500		Estimated Cost		nt(s)
Subtotal of Estimated Cost	14/0	1470	6-1 Lee Community Room Building	Replace Floor Tiles	0-1 Lee Apartments 1470	Expansions/Renovations/Unexpected Needs	6-11 Tiffiny Court	6-I Lee Apartments	Pave Parking Lots 1470	1460	Wall/Floor/Ceiling Repairs	Install Hard-Wired Smoke Detectors	Emergency Water/Sewer Line Repairs	6-11 Tiffany Court	1460	Wall/Floor/Celling Repairs	Install Hard-Wired Smoke Detectors	Emergency Water/Sewer Line Repairs	Replace Water Meter/Covers/Enclosures /Cut- offs	6-1 Lee Apartments	Development Number/Name General Description of Major Work Categories	Work Statement for Year: 5 FFY 2015	
Cost														45							Quantity	Year: 5	
\$130,302	Stayono	000 C13	\$1,000		acont e	(100)	5,000	5,000		\$34,302	4,302	5,000	25,000		\$84,000	4,000	5,000	25,000	20,000	20000	Estimated Cost		

\$61.250	Subtotal of Estimated Cost	661 750	Cultratal of Estimated Cost	
54,500	1465	\$4,500	1465	CO COMPANY
3/3	HVAC Equipment	375	HVAC Equipment	
27.0	Emergency Mold Remediation	375	Emergency Mold Remediation	
3/2	ADA Modifications	375	ADA Modifications	STATE OF
200	Dumpster Repairs	375	Dumpster Repairs	
3,000	Refrigerators	3,000	Refrigerators	
51000	1700	\$15,000	1450	The state of the s
000 213	Playground Improvements	750	Playground Improvements	DESCRIPTION OF THE PERSON OF T
057		750	Pest Control	
057	Fence Repairs	750	Fence Repairs	
750	Sidewalks/Parking Lots/Alleys/Streets	-	Sidewalks/Parking Lots/Alleys/Streets	
0,000	Landscaping	6,000	Landscaping	
6,000	Neighborhood Appearance	6,000	Neighborhood Appearance	
0.75	1491	\$7,875	1430	
36863	Tech Service Long Term Asset Mgmt Plan	375	Tech Service Long Term Asset Mgmt Plan	
2000-1	PHA Wide A&E Fees	-	PHA Wide A&E Fees	
333,875	1408	\$33,875	1408	The second
007	Long Term Asset Mgmt Plan	750	Long Term Asset Mgmt Plan	
37	HVAC Tech & Equipment	375	HVAC Tech & Equipment	
5/5	Resident Business Development	375	Resident Business Development	
1,500	Telecomm/Computer Upgrades/Security Cameras	7,500	Telecomm/Computer Upgrades/Security Cameras	S. S
2/5	UPCS Inspection Services	375	UPCS Inspection Services	THE REAL PROPERTY.
0071	Maint/Mgmt Training		Maint/Mgmt Training	
000	Resident Initiatives Supplies	500	Resident Initiatives Supplies	NAME OF STREET
0,000	Resident Initiatives Manager	10,500	Resident Initiatives Munager	
1,230	Resident Training	1,250	Resident Training	Statement
0001	Vista Office Supplies	1,000	Vista Office Supplies	Annual
10,000	Vista Workers	10,000	Vista Workers	Sec
Estimated Cost	General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Year 1 FFY 2011
	Work Statement for Year. 3 FFY 2013		Work Statement for Year 2 FFY 2012	Work Statement for
	200 200 200 200 200 200 200 200 200 200		0	the party of the last

1450 315,000 3,000 3,000 375 375 375 375 375 375		34,500	C0+1	
	THE STREET STREET	002 73		
	HVAC Equipment	375	HVAC Equipment	
	Emergency Mold Remediation	375	Emergency Mold Remediation	
	ADA Modifications	375	ADA Modifications	
	Dumpster Repairs	375	Dumpster Repairs	
	Refrigerators	3,000	Refrigerators	
		\$15,000	1450	
	Playground Improvements	750	Playground Improvements	
	Pest Control	750	Pest Control	
750	Fence Repairs	750	Fence Repairs	THE REAL PROPERTY.
750	Sidewalks/Parking Lots/Alleys/Streets	750	Sidewalks/Parking Lots/Alleys/Streets	STATE OF THE PERSON NAMED IN
0,000	Landscaping	6,000	Landscaping	
6000	Neighborhood Appearance	6,000	Neighborhood Appearance	The state of
1430		57,875	1430	
	Tech Service Long Term Asset Mgmt Plan	375	Tech Service Long Term Asset Mgmt Plan	
		7,500	PHA Wide A&E Fees	
1		\$33,875	1408	
1408 333,575		750	Energy Audit	S. S
	Long Term Asset Mgmt Plun	750	Long Term Asset Mgmt Plun	The state of the s
750	HVAC Tech & Equipment	375	HVAC Tech & Equipment	
	Resident Business Development	375	Resident Business Development	
y Cameras 0,750	Telecomm/Computer Upgrades/Security Cameras	6,750	Telecomm/Computer Upgrades/Security Cumerus	STATE OF THE PERSON NAMED IN
	UPCS Inspection Services	375	UPCS Inspection Services	
274	Maint/Mgmt Training	1,250	Maint/Mgmt Training	
1 250		500	Resident Initiatives Supplies	THE REAL PROPERTY.
000001	Resident Initiatives Manager	10,500	Resident Initiatives Manager	
003.01	Resident Training	1,250	Resident Training	Statement
1,240	Vista Office Supplies	1,000	Vista Office Supplies	Annual
1,000	Vista Workers	10,000	Vista Workers	See
Estimated Co	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Year 1 FFY 2011
nt for Year:2	Work Stat		Work Work Statement for Year 4 Statement for FFY 2014	Work Statement for

PHA I	PHA Name/Number Kingsport Housing & Redevelopment Authority Development Number and Work St	Housing & Work Statement	Work Stat	Locality (City/ Kingsport, Sulli ement for Year 2	gy/Cou	gy/Cou
	Development Number and Name	Work Statement for Year 1	Work Statement for Year 2 FFY 2012	If 2	ar 2 Work Statement for Year 3 FFY 2013	Work Statement for Year 3 FFY 2013
	TN6-4 Cloud Apartments PHA-Wide	FFY 2011				
	Physical Improvements Subtotal	Annual Statement	\$198,802		\$41,500	
-	Management Improvements		\$33,875		\$33,875	\$33,875
_	PHA-Wide Non-dwelling Structures and Equipment		\$7,000		\$1,000	\$1,000 \$60,200
F.	Administration	THE PERSON NAMED IN				
	Other	THE PERSON NAMED IN	\$7,875		\$7,875	\$7,875
G,	Operations	THE REAL PROPERTY.				
H	Demolition					
	Development	TOTAL PROPERTY.				
-	Capital Fund Financing – Debt Service	THE RESERVE				
*	Total CFP Funds	THE REAL PROPERTY.	\$246,553		\$84,250	\$84,250 \$160,950
+ 1	Total Non-CFP Funds					
	Count Total		\$247.552	_	\$84,250	S84.250 S160,950

AHd	PHA Name/Number		Locality (City/county & State)	county & State)	Original 5-Year Plan Revision No:	Revision No:
>	Number	Work Statement for	Work Statement for Year 2 Work Statement for Year 3 FFY FFY	Work Statement for Year 3 FFY	Work Statement for Year 4 FFY	Work Statement for Year 5 FFY
		Year 1 FFY				
		Annual				
		THE REAL PROPERTY.				
		STATISTICS OF ST				
		THE PARTY OF THE P	8			
		The state of the s				
		PER STUDIO				

					SATURE OF STREET		10000000000000000000000000000000000000	- ANDERSON			Statement	Annual	Sec	Year I FFY 2011	Work Statement for	A 110 4 150 C
Subt	1470	6-4 Cloud Apartments	Replace Dumpster Surrounds	A CONTRACTOR OF THE PARTY OF TH	6-4 Cloud Apartments	Community Bldgs / Offices Expansions/ Renovations/ Unexpected Needs				1460	Wall/Floor/Ceiling Repairs	Replace HVAC	6-4 Cloud Apartments	Development Number/Name General Description of Major Work Categories	1	The state of the s
Subtotal of Estimated Cost														Quantity	Work Statement for Year 2 FFY 2012	The second secon
\$188,302	\$6,000	5,000		and only	2,000					\$179,302	4,000	175,302		Estimated Cost		Colombia Colombia
				1470	6-4 Cloud Apartments	Community Bldgs / Offices Expansions/ Renovations/ Unexpected Needs		1460	Sewer Line Repair	Repair/Replace Bathtub	Replace Storm Doors	Wall/Floor/Ceiling Repairs	6-4 Cloud Apartments	Development Number/Name General Description of Major Work Categories		
Subtotal of Estimated Cost														Quantity	Work Statement for Year:3 FFY 2013	The state of the s
\$23,000				\$1,000	1,000			\$22,000	1,000	10,000	10,000	1,000		Estimated Cost		

4,000 \$39,500 Pave Parking Lots 1470 6-4 Cloud Apartments 1,000 Expansions/Renovations/Unexpected Needs 6-4 Cloud Apartments 25,000 Replace Floor Tiles 6-4 Cloud Community Room Building 24,200 10,000 \$86,000	Community Bidgs/Offices Expansions/Renovations/Unexpected Needs 6-4 Cloud Apartments 6-4 Cloud Apartments Expand Storage Building & Parking Lot 6-4 Cloud Apartments Replace Fence 6-4 Cloud Apartments 1470
Pave Parking Lots 1470 6-4 Clood Apartments Community Bidgs/Offices Expansions/Renovations/Unexpected Nec 6-4 Cloud Apartments Replace Floor Tiles 6-4 Cloud Community Room Building	ons/Unexpected N
Pave Parking Lots 1470 6-4 Clood Apartments Community Bldgs/Offices Expansions/Renovations/Unexpected Nec 6-4 Cloud Apartments Replace Floor Tiles 6-4 Cloud Community Room Building	ons/Unexpected N
Pave Parking Lots 1470 6-4 Cloud Apartments Community Bldgs/Offices Expansions/Renovations/Unexpected Nec 6-4 Cloud Apartments Replace Floor Tiles 6-4 Cloud Community Room Building	Community Bidgs/Offices Expansions/Renovations/Unexpected Needs 6-4 Cloud Apartments Relocate Picnic Shelter 6-4 Cloud Apartments Expand Storage Building & Parking Lot 6-4 Cloud Apartments Replace Fence 6-4 Cloud Apartments
Pave Parking Lots 1470 6-4 Cloud Apartments Community Bldgs/Offices Expansions/Renovations/Unexpected Nes 6-4 Cloud Apartments Replace Floor Tiles 6-4 Cloud Community Room Building	Community Bidgs/Offices Expansions/Renovations/Unexpected Needs 6-4 Cloud Apartments 6-4 Cloud Apartments Expand Storage Building & Parking Lot 6-4 Cloud Apartments Replace Fence
Pave Parking Lots 1470 6-4 Clood Apartments Community Bidgs/Offices Expansions/Renovations/Unexpected Nec 6-4 Cloud Apartments Replace Floor Tiles 6-4 Cloud Community Room Building	Community Bidgs/Offices Expansions/Renovations/Unexpected Needs 6-4 Cloud Apartments Relocate Picnic Shelter 6-4 Cloud Apartments Expand Storage Building & Parking Lot 6-4 Cloud Apartments
Pave Parking Lots 1470 6-4 Cloud Apartments Community Bldgs/Offices Expansions/Renovations/Unexpected Nee 6-4 Cloud Apartments Replace Floor Tiles 6-4 Cloud Community Room Building	Community Bidgs/Offices Expansions/Renovations/Unexpected Needs 6-4 Cloud Apartments Relocate Picnic Shelter 6-4 Cloud Apartments Expand Storage Building & Parking Lot
Pave Parking Lots 1470 6-4 Clood Apartments Community Bldgs/Offices Expansions/Renovations/Unexpected Nee 6-4 Cloud Apartments Replace Floor Tiles	Community Bidgs/Offices Expansions/Renovations/Unexpected Needs 6-4 Cloud Apartments Relocate Picnic Shelter 6-4 Cloud Apartments
Pave Parking Lots 1470 6-4 Clood Apartments Community Bldgs/Offices Expansions/Renovations/Unexpected Nee 6-4 Clood Apartments	Community Bldgs/Offices Expansions/Renovations/Unexpected Needs 6-4 Cloud Apartments Relocate Picnic Shelter
Pave Parking Lots 1470 6-4 Cloud Apartments Community Bldgs/Offices Expansions/Renovations/Unexpected Nec	Community Bidgs/Offices Expansions/Renovations/Unexpected Needs 6-4 Cloud Apartments
Pave Parking Lots 1470 6-4 Clood Apartments	Community Bidgs/Offices Expansions/Renovations/Unexpected Needs
Pave Parking Lots	
	1460
	Walt/Floor/Celling Repairs
25,000 Wall/Floor/Ceiling Repairs	Replace Vinyl Siding (Porches, Gables, etc)
5,000 Install Hard-Wired Smoke Detectors	Statement Replace Interior Doors
5,500 Emergency Water/Sewer Line Repairs	Annual Replace Storm Doors
6-4 Cloud Apartments	See 6-4 Cloud Apartments
Estimated Cost Development Number/Name Quantity Estimated Cost General Description of Major Work Categories	Development Number/Name General Description of Major Worl Categories
Work Statement for Year: 5 FFY 2015	Work Work Statement for Year 4 Statement for FFY 2014

Vista Office Supplies Vista Office Supplies Resident Initiatives Manager Resident Initiatives Supplies Maint/Mgmt Training UPCS Inspection Services Telecomm/Computer Upgrades/Security Cameras Resident Business Development HVAC Tech & Equipment Long Term Asset Mgmt Plan Long Term Asset Mgmt Plan 1408 PHA Wide A&E Fees Tech Service Long Term Asset Mgmt Plan Tech Service Long Term Asset Mgmt Plan Neighborhood Appearance Landscaping Sidewalks/Purking Lots/Alleys/Streets Fence Repairs Peat Control Playground Improvements Playground Improvements Playground Remediation Emergency Mold Remediation Emergency Mold Remediation Emergency Mold Remediation Subtotal of Estimated Cost \$61,250

S61,250	Subtotal of Estimated Cost	\$61,250	Subtotal of Estimated Cost	The state of the s
\$4,500	1465	\$4,500	1465	の世代の
375	HVAC Equipment	375	HVAC Equipment	
375	Emergency Mold Remediation	375	Emergency Mold Remediation	
375	ADA Modifications	375	ADA Modifications	
375	Dumpster Repairs	375	Dumpster Repairs	THE REAL PROPERTY.
3,000	Refrigerators	3,000	Refrigerators	THE PERSON NAMED IN
\$15,000	1450	\$15,000	1450	
750	Playground Improvements	750	Playground Improvements	
750	Pest Control	750	Pest Control	Control of the last
750	Fence Repairs	750	Fence Repairs	
750	Sidewalks/Parking Lots/Alleys/Streets	750	Sidewalks/Parking Lots/Alleys/Streets	
6,000	Landscaping	6,000	Landscaping	
6,000	Neighborhood Appearance	6,000	Neighborhood Appearance	
\$7,875	1430	\$7,875	1430	
375	Tech Service Long Term Asset Mgmt Plan	375	Tech Service Long Term Asset Mgmt Plun	
7,500	PHA Wide A&E Fees	7,500	PHA Wide A&E Fees	THE PERSON NAMED IN
		\$33,875	1408	の時間に対
\$33,875	1408	750	Energy Audit	No. or other Persons
750	Long Term Asset Mgmt Plan	750	Long Term Asset Mgmt Plan	日本の日の日
1,125	HVAC Tech & Equipment	375	HVAC Tech & Equipment	
375	Resident Business Development	375	Resident Business Development	
6,750	Telecomm/Computer Upgrades/Security Cameras	6,750	Telecomm/Computer Upgrades/Security Cameras	
375	UPCS Inspection Services	375	UPCS Inspection Services	
1,250	Maint/Mgmt Training	1,250	Maint/Mgmt Training	
500	Resident Initiatives Supplies	500	Resident Initiatives Supplies	問題が大
10,500	Resident Initiatives Manager	10,500	Resident Initiatives Manager	The second
1,250	Resident Training	1,250	Resident Training	Statement
1,000	Vista Office Supplies	1,000	Vista Office Supplies	Annual
10,000	Vista Workers	10,000	Vista Workers	See
Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Year 1 FFY
	Work Statement for Year:5 FFY 2015		Work Statement for Year 4 FFY 2014	Work Statement for

Part I	PHA N Redeve	>	******	B. F	C		E. /	F. (G. (Н. П				
Part I: Summary	PHA Name/Number Kingsport Housing & Redevelopment Authority	Development Number and Name	TN6-7 Dogwood Terrace TN6-9 Holly Hills TN6-9 Administration Bldg Main Office PHA-Wide	Physical Improvements Subtotal	Management Improvements	PHA-Wide Non-dwelling	Administration	Other	Operations	Demolition	Development	Capital Fund Financing – Debt Service	Total CFP Funds		Total Non-CFP Funds
	lousing &	Work Statement for Year 1	FFY <u>2011</u>	Annual Statement			The Party of the P		THE REAL PROPERTY.		の世界の一般		OF THE PERSON NAMED IN		
	Locality (City/) Kingsport, Sulli	Work Statement for Year 2 FFY 2012		\$52,500	\$33,875	\$13,000		\$7,875					\$107,250	The Control of the Co	
	Locality (City/County & State) Kingsport, Sullivan County, TN	Work Statement for Year 3 FFY 2013		\$204,802	\$33,875	\$3,000		\$7,875					\$249,552		
1000	⊠Original 5-Year Plan	Work Statement for Year 4 FFY 2014		\$98.500	\$33,875	\$16,400		\$7,875					\$156,650		
	Revision No:	Work Statement for Year 5 EFY 2015		\$62,500	\$33,875	\$45,000		\$7,875				*	\$149,250		61.10 750

Part	Part I: Summary (Continuation)	ation)				
PHA	PHA Name/Number		Locality (City/county & State)	ounty & State)	Original 5-Year Plan	Revision No:
>	Development Number and Name	Work Statement for Year 1	Work Statement for Year 2 FFY	Work Statement for Year 3 FFY		Work Statement for Year 5 FFY
		Annual Statement				
		既には、公会				
		Selling Selling				
		TOTAL STREET				

						The state of the s			THE REAL PROPERTY.					THE RESERVE	Statement	Annual	See	Year 1 FFY 2011	Work Statement for
Subto	1470	6-9 Holly Hills	6-7 Dogwood	Surrounds	6-9 Administration Bidg	6-9 Holly Hills	6-7 Dogwood	Community Bldgs. / Offices	1460	Wall/Floor/Ceiling Repairs	Replace HVAC (Unit 21 & 25)	Replace Water Meter Covers & Cutoff Valves	6-9 Helly Hills	1460	Wall/Floor/Ceiling Repairs	Replace Water Meter Covers & Cutoff Valves	6-7 Dogwood Terrace	Development Number/Name General Description of Major Work Categories	Work Statement for Year 2 Statement for FFY 2012
Subtotal of Estimated Cost																		Quantity	Work Statement for Year 2 FFY 2012
\$46,000	\$13,000	5,000	5,000		1,000,1	1,000	1,000		\$19,000	4,000	5,000	10,000		\$14,000	4,000	10,000		Estimated Cost	
Subto	1470	6-9 Administration Building/Main Office	4	_	Offices		1460	Wall/Floor/Celling Repairs	Repair/Replace Bathtub	Emergency Water &/or Sewer Line Repair	6-9 Holly Hills	1460	Emergency Water &/or Sewer Line Repair	Repair/Replace Bathtub	_	Wall/Floor/Ceiling Repairs	6-7 Dogwood Terrace	Development Number/Name General Description of Major Work Categories	W
Subtotal of Estimated Cost																		Quantity	Work Statement for Year-3 FFY 2013
\$188,302	33,000	1,000	1,000	1,000	000 1		212,000	1,000	10,000	1,000		3173,302	1,000	0,000	302,1912	1,000	1000	Estimated Cost	

\$88,000	Cost	Subtotal of Estimated Cost	\$95,400	ed Cost	Subtotal of Estimated Cost	
\$45,000		1470				
1,000		6-9 Administration Bldg		570		The Real Property lies
1,000		6-9 Holly Hills				
1,000		6-7 Dogwood				STATE OF THE PARTY
		Community Bldgs. / Offices				THE REAL PROPERTY.
1,000		6-9 Holly Hills Community Building				
1,000		6-7 Dogwood Terrace Community Building	\$16,400		1470	
		Replace Floor Tiles	13,400		6-7 Dogwood Community Center	
3,000		Replace Window Blinds			Replace Fence and Ball Court	は、は、のないの
7,000		Replace Exterior Lighting				
10,000		Expand Parking Lot	1,000		6-9 Administration Bldg	THE REAL PROPERTY.
10,000		Replace Carpet	1,000		6-9 Holly Hills	SOLICE STATES
		Administration Building	1,000		6-7 Dogwood	
5,000		6-9 Holly Hills			Community Bldgs. / Offices	
5,000		6-7 Dogwood Terrace		800		S. A. Sandar
		Pave Parking Lots	\$39,500		1460	
			4,000		Wall/Floor/Ceiling Repairs	C. H. Sandara
\$34,000		1460	25,000		Replace Vinyl Siding (Porches, Gables, etc)	THE REAL
4,000		Wall/Floor/Ceiling Repairs	5,000		Replace Interior Doors	
5,000		Install Hard-Wired Smoke Detectors	5,500		Replace Storm Doors	公明在
25,000		Emergency Water/Sewer Line Repairs			6-9 Holly Hills	
		6-9 Holly Hills	\$39,500		1460	
			4,000		Wall/Floor/Ceiling Repairs	
9,000		1460	25,000		Replace Vinyl Siding (Porches, Gables, etc)	
4,000		Wall/Floor/Ceiling Repairs	5,000		Replace Interior Doors	Statement
5,000		Install Hard-Wired Smoke Detectors	5,500		Replace Storm Doors	Annual
		6-7 Dogwood Terrace			6-7 Dogwood Terrace	See
Estimated Cost	Quantity	Development Number/Name General Description of Major Work Categories	Estimated Cost	Quantity	Development Number/Name General Description of Major Work Categories	Year 1 FFY 2011
	Year: 5	Work Statement for Year: 5		for Year 4	Work Statement for Year 4 FFY 2014	Work Statement for
			(c)			

861 750	Subtotal of Estimated Cost	\$61.250	Subtotal of Estimated Cost	
\$4,500	1465	\$4,500	1465	
375	HVAC Equipment	375	HVAC Equipment	
375	Emergency Mold Remediation	375	Emergency Mold Remediation	
375	ADA Modifications	375	ADA Modifications	
375	Dumpster Repairs	375	Dumpster Repairs	
3,000	Refrigerators	3,000	Refrigerators	
\$15,000	1450	\$15,000	1450	
750	Playground Improvements	750	Playground Improvements	
750	Pest Control	750	Pest Control	
750	Fence Repairs	750	Fence Repairs	
750	Sidewalks/Parking Lots/Alleys/Streets	750	Sidewalks/Parking Lots/Alleys/Streets	
6,000	Landscaping	6,000	Landscaping	
6,000	Neighborhood Appearance	6,000	Neighborhood Appearance	
3/,5/3	1430	\$7,875	1430	
373	Tech Service Long Term Asset Mgmt Plun	375	Tech Service Long Term Asset Mgmt Plan	The State of the
7,500	PHA Wide A&E Fees	7,500	PHA Wide A&E Fees	
\$33,875	1408	\$33,875	1408	
750	Long Term Asset Mgmt Plan	750	Long Term Asset Mgmt Plan	
375	HVAC Tech & Equipment	375	HVAC Tech & Equipment	
375	Resident Business Development	375	Resident Business Development	
7,500	Telecomm/Computer Upgrades/Security Cumerus	7,500	Telecomm/Computer Upgrades/Security Cameras	
375	UPCS Inspection Services	375	UPCS Inspection Services	
1,250	Maint/Mgmt Training	1,250	Maint/Mgmt Training	
500	Resident Initiatives Supplies	500	Resident Initiatives Supplies	Mary Services
10,500	Resident Initiatives Manager	10,500	Resident Initiatives Manager	
1,250	Resident Training	1,250	Resident Training	Statement
1,000	Vista Office Supplies	1,000	Vista Office Supplies	Annual
10,000	Vista Workers	10,000	Vista Workers	See
Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Year 1 FFY 2011
	Work Statement for Year: 3 FFY 2013		Work Statement for Year 2 FFY 2012	Work Statement for

1465	Cubartal of Estimated Cost	\$61.250	Subtotal of Estimated Cost	
		\$4,500	1465	
	HVAC Equipment	375	HVAC Equipment	TO LONG TO
	Emergency Mold Remediation	375	Emergency Mold Remediation	THE REAL PROPERTY.
	ADA Modifications	375	ADA Modifications	STATE OF THE PARTY
	Dumpster Repairs	375	Dumpster Repairs	The state of the s
	Refrigerators	3,000	Refrigerators	
1450 \$15,000		\$15,000	1450	
	Playground Improvements	750	Playground Improvements	No.
	Pest Control	750	Pest Control	ではないので
	Fence Repairs	750	Fence Repairs	
	Sidewalks/Parking Lots/Alleys/Streets	750	Sidewalks/Parking Lots/Alleys/Streets	
	Landscaping	6,000	Landscaping	THE PERSON
	Neighborhood Appearance	6,000	Neighborhood Appearance	The second
1430		\$7,875	1430	The same of the sa
	Tech Service Long Term Asset Mgmt Plan	375	Tech Service Long Term Asset Mgmt Plan	
	PHA Wide A&E Fees	7,500	PHA Wide A&E Fees	
	ALI DO OR DE VERTIDADO	\$33,875	1408	/ 经营业的
1408 \$33,875	A CONTRACTOR DESCRIPTION OF THE PROPERTY OF TH	750	Energy Audit	No or other lates of the lates
STATE OF THE PARTY	Long Term Asset Mgmt Plan	750	Long Term Asset Mgmt Plan	
	HVAC Tech & Equipment	375	HVAC Tech & Equipment	TO THE PERSON
	Resident Business Development	375	Resident Business Development	TO SECOND
	Telecomm/Computer Upgrades/Security Cameras	6,750	Telecomm/Computer Upgrades/Security Cameras	The state of
	UPCS Inspection Services	375	UPCS Inspection Services	TO THE TO
	Maint/Mgmt Training	1,250	Maint/Mgmt Training	
	Resident Initiatives Supplies	500	Resident Initiatives Supplies	
		10,500	Resident Initiatives Manager	THE PARTY OF
	Resident Training	1,250	Resident Training	Statement
	Vista Office Supplies	1,000	Vista Office Supplies	Annual
	Vista Workers	10,000	Vista Workers	See
ies Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost	General Description of Major Work Categories	Year FFY 2011
Year.5	Work Statement for Year:5 FFY 2015		Work Statement for Year 4 FFY 2014	Work Statement for

PHA Name/Number Kingsport Housing & Redevelopment Authority	Housing &	Locality (City/	Locality (City/County & State) Kinesport Sullivan County, TN	⊠Original 5-Year Plan
A. Name	Work Statement for Year 1	Work Statement for Year 2	Work Statement for Year 3	Work Statement for Year 4
AMP 5 Riverview Place PHA-Wide	FFY 2011	FFY 2012	FFY 2013	FFY 2014
 B. Physical Improvements Subtotal 	Aunual Statement	\$23,500	\$20,500	\$24,500
C. Management Improvements		\$33,875	\$33,875	\$33,875
D. PHA-Wide Non-dwelling Structures and Equipment		\$0	000,18	\$1,000
E. Administration				
F. Other	S. SEEDING IN	\$7,875	\$7,875	\$7,875
G. Operations	THE PERSON NAMED IN			
H. Demolition				
I. Development				
Capital Fund Financing – Debt Service				
K. Total CFP Funds	No. of the last of	\$65,250	\$63,250	\$67,250
L. Total Non-CFP Funds				
M Grand Total		\$65.250	\$63,250	\$67,250

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PHA Name/Number Development Number A. and Name Work Statement for Year 2 FFY Work Statement for Year 2 Work Statement for Year 3 Work Statement for Year 3 FFY Work Statement for Year 3 FFY Mork Statement for Year 3 FFY Work Statement for Year 4 FFY Work Statement for Year 3 Work Statement for Y	-	Communication Communication	anou)	Cheer Av Cal			
Number Work Statement for Year 2 Work Statement for Year 3 FFY Year 1 Annual Statement Statement Annual Statement The statement for Year 2 FFY FY	PHA				county & State)	Original 5-Year Plan	Revision No:
Annual Statement Statement	>	Number	Work Statement for Year 1 FFY	Work Statems	Work Statement for Year 3 FFY	Work Statement for Year 4 FFY	Work Statement for Year 5
			Annual Statement				
			1000000000000000000000000000000000000				
			THE REAL PROPERTY.				
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			THE PERSON NAMED IN				

	THE PERSON NAMED IN	No. of Lines			THE PERSON NAMED IN	THE RESERVE THE PERSON		ST HEREN	Statement	Annual	Sec	2011	Statement for	
Subto									1460	Wall/Floor/Ceiling Repairs	AMP 5 Riverview Place	Development Number/Name General Description of Major Work Categories		(c) transferred to the contract of the contrac
Subtotal of Estimated Cost												Quantity	Work Statement for Year 2 FFY 2012	Section of the sectio
\$4,000									\$4,000	4,000		Estimated Cost		/ohmanne
Subt				0.00	0751	AMP5 Riverview Place	Community Bldgs. / Offices		1460	Wall/Floor/Ceiling Repairs	AMP 5 Riverview Place	Development Number/Name General Description of Major Work Categories	ų.	
Subtotal of Estimated Cost												Quantity	Work Statement for Year:3 FFY 2013	
\$3,000				34,000	000 63	2,000			\$1,000	1,000		Estimated Cost		

		The state of the s	Statement	2011 See	Work Statement for Year 1 FFY
Subtotal of Estimated Cost	Community Bldgs. / Offices AMP 5 Riverview Place 1470	700+1	Wall/Floor/Ceiling Repairs	General Description of Major Work Categories AMP 5 Riverview Place	Work Work Statement for Year 4 Statement for Year 1 FFY Development Number/Name Quantity Es
d Cost					for Year ₫
\$6,000	1,000	applice.	5,000		Estimated Cost
Subtotal of Estimated Cost	Community Bldgs. / Offices AMP 5 Riverview Place 1470	1400	Wall/Floor/Ceiling Repairs	General Description of Major Work Categories AMP 5 Riverview Place	Work Statement for Year: 5 FFY 2015 Development Number/Name Ouanti
Cost					r Year: <u>\$</u>
\$6,000	2,000 \$2,000	34,000	4,000		Estimated Cost

Asset Mgmt Plan 1430 375 ce 1430 57,875 ce 6,000 Alleys/Streets 750 as 1450 515,000 as 1450 3,000 3,750 375 fiation 1465 54,590		200	Sublotal of Estimated Cost	1000
Ngmt Plan 1430 Streets 1450 5	HISTORY CO.	\$4,500	1465	
/Streets 1430 1430 Streets	HVAC Equipment	375	HVAC Equipment	
Plan 1430 1430	Emergency Mold Remediation	375	Emergency Mold Remediation	
Plan 1430 1430	ADA Modifications	375	ADA Modifications	
Plan 1430 1430	Dumpster Repairs	375	Dumpster Repairs	
Plan 1430 1430	Refrigerators	3,000	Refrigerators	
Plan 1430		\$15,000	1450	THE SHEET
Plan 1430	Playground Improvements	750	Playground Improvements	
Plan 1430	Pest Control	750	Post Control	100
Plan 1430	Fence Repairs	750	Fence Repairs	
1430	Sidewalks/Parking Lots/Alleys/Streets	750	Sidewilks/Parking Lots/Alleys/Streets	HISTON I
1430	Landscaping	6,000	Landscaping	
1430	Neighborhood Appearance	6,000	Neighborhood Appearance	
		\$7,875	1430	
	Tech Service Long Term Asset Mgmt Plan	375	Tech Service Long Term Asset Mgmt Plan	TO WATER
	PHA Wide A&E Fees	7,500	PHA Wide A&E Fees	
		\$33,875	1408	THE PERSON NAMED IN
1408 \$33,875	The second secon	750	Energy Audit	
Plan	Long Term Asset Mgmt Plan	750	Long Term Asset Mgmt Plan	
int 1,125	HVAC Tech & Equipment	375	HVAC Tech & Equipment	Charles and the last
lopment	Resident Business Development	375	Resident Business Development	100000000000000000000000000000000000000
ogrades/Security Cameras 6,750	Telecomm/Computer Upgrades/Security Cameras	6,750	Telecomm/Computer Upgrades/Security Cumeras	THE STATE OF THE PARTY OF THE P
ės sa	UPCS Inspection Services	375	UPCS Inspection Services	
1,250	Maint/Mgmt Training	1,250	Maint/Mgmt Training	
plies	Resident Initiatives Supplies	500	Resident Initiatives Supplies	STATE OF THE PARTY
	Resident Initiatives Manager	10,500	Resident Initiatives Manager	
1,250	Resident Training	1,250	Resident Training	Statement
1,000		1,000	Vista Office Supplies	Annual
10,000		10,000	Vista Workers	See
Development Number/Name Estimated Cost Description of Major Work Categories	Developm General Description	Estimated Cost	Development Number/Name General Description of Major Work Categories	2011
Work Statement for Year:5 FFY 2015			Work Statement for Year 4 Statement for FFY 2014	Work Statement for

Part I:	PHA Na Redevelo	> Z Z Z Z	B, Ph	C. M		E Ac	F. 01	G, Or	H. De	I. D	J. Cu	D	K D	
Part I: Summary	PHA Name/Number Kingsport Housing & Redevelopment Authority	Development Number and Name TN0076 AMP 1, 2, 3 and 5	Physical Improvements Subtotal	Management Improvements	PHA-Wide Non-dwelling Structures and Equipment	Administration	Olber	Operations	Demolition	Development	Cupital Fund Financing -	Total CFP Funds	Total Non-CFP Funds	
	Housing &	Work Statement for Year I FFY 2011	Annual Statement					The second second	THE PERSON NAMED IN	一年 日本	THE RESERVE OF			
	Locality (City/ Kingsp	Work Statement for Year 2 FFY 2012	\$314,303	\$135,500	\$56,400	\$76,815	\$31,500	\$153,629				\$768,146		
	Locality (City/County & State) Kingsport, TN	Work Statement for Year 3 FFY 2013	\$39,302	\$135,500	\$31,400	\$76,815	\$31,500	\$153,629				\$768,146	SSISTANDO	6769 146
	⊠Original 5-Year Plan	Work Statement for Year 4 FFY 2014	\$266,702	\$135,500	\$104,000	\$76,815	\$31,500	\$153,629	The second secon			\$768,146		6768 146
	Revision No:	Work Statement for Year 5 FFY 2015	\$279,302	\$135,500	\$91,400	\$76,815	\$31,500	\$153,629				\$768,146		\$768.146

PHA	PHA Name/Number	PHA Name/Number	Locality (City/	Locality (City/county & State)	Original 5-Year Plan Revision No:	Revision No:
Α.	Number	Work Statement for	Work Statement for Year 2 FFY	Work Statement for Year 3 FFY	Work Statement for Year 4 FFY	Work Statement for Year 5
		Year 1 FFY				
		Annual Statement				
		STATE OF THE PARTY				
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		STATE OF STA				
		CHICAL ST. INC.	Security of the second			
		STATE OF THE PARTY				
		生の一と				

5	Cultottal of Estimated Cost	cor 2013	Cart	Subtotal of Estimated Cost	
_	WHISTIOGS COME repairs 1460				
_		\$4,000		1460	
_	-	4,000		Wall/Floor/Ceiling Repairs	
	Replace Rear Decks			AMP 5 Riverview Place	
	Wall/Floor/Ceiling Repairs			(Approximately and Approximately approximate	1
П	10 Emergency Water &/or Sewer Line Repairs	S11,000		1460	ALCOHOLD
	AMP 16-1	1,000		Wall/Floor/Ceiling Repairs	2000年11月1日
Г	00 1460	10,000		Replace HVAC	
П	Replace/Repair Bathtubs			AMP 16-11 Tiffany Court	STATE OF STREET
Г	Wall/Floor/Ceiling Repairs				
Т	00 Emergency Water &/or Sewer Line Repairs	\$19,000		1460	
1	-	4,000		Wall/Floor/Ceiling Repairs	
Т		5,000		Replace HVAC (Units 21 and 25)	
	Repair/Replace Bathtubs	10,000		Water Meter Covers/Cutoff Valves Replaced	The state of
1	Replace Roofing/Guttering	200000		AMP 3 6-9 Holly Hills	
	Wall/Floor/Ceiling Repairs	STATE OF THE PARTY			
П	00 Emergency Water &/Or Sewer Line Repairs	\$14,000		1460	STATE OF STREET
		4,000		Wall/Floor/Ceiling Repairs	
	00 1460	10,000		Water Meter Covers/Cutoff Valves Replaced	
	Repair/Replace Bathtubs			AMP 3 6-7 Dogwood Terrace	北京の間のであった
	Replace Storm Doors				
		\$149,302		1460	
r	00 Emergency Water &/Or Sewer Line Repairs	4,000		Wall/Floor/Ceiling Repairs	BEAL NAME OF
		175,302		Replace HVAC	THE REAL PROPERTY.
	1460			AMP 2 6-4 Cloud Apartments	
	Repair/Replace Bathtubs				STATE OF STREET
		\$9,000		1460	
	00 Wall/Floor/Ceiling Repairs	4,000		Wall/Floor/Celling Repairs	Statement
	00 Emergency Water &/or Sewer Line Repairs	5,000		Replace HVAC	Annual
	AMP I 6-I Lee Apartments			AMP I 6-1 Lee Apartments	Sec
	Development Number/Name General Description of Major Work Categories	Estimuted Cost	Quantity	Development Number/Name General Description of Major Work Categories	Year 1 FFY 2011
1 14	Work Statement for Year: 2 FFY 2013		r Year 2	Work Statement for Year 2 FFY 2012	Work Statement for
f	W. J. Contract for	10000			

THE PERSON NAMED IN						The second second					STATE TOWNS AND ASSESSED.				THE REAL PROPERTY.				THE PERSON NAMED IN	Statement	Annual	See	Year 1 FFY 2011	Work Statement for	Part II: Sup
Subtotal of Estimated Cost							1475	Maintenance/Management Vehicles	1470	AMP 1 6-11 Tiffany Court	AMP 3 6-9 Holly Hills	AMP 3 6-7 Dogwood Terrace	AMP 2 6-4 Cloud Apartments	AMP 1 6-1 Lee Apartments	Replace Dumpster Surrounds		AMP 3 6-9 Admin Building/Main Office	AMP 3 6-9 Holly Hills	AMP 3 6-7 Dogwood Terrace	AMP 2 6-4 Cloud Apartments	AMP 1 6-1 Lee Apartments	Community Buildings/ Offices/ Expansion/ Renovations / Unexpected Needs	Development Number/Name General Description of Major Work Categories	Work Statement for Year 2 FFY 2012	Part II: Supporting Pages - Physical Needs Work Statement(s)
Cost																							Quantity	r Year 2	Stateme
\$56,400							\$25,400		\$31,000	5,000	5,000	5,000	5,000	5,000			1,000	1,000	1,000	2,000	1,000		Estimated Cost		nt(s)
Subtotal of Estimated Cost											1475	Maintenance/Management Vehicles		1470		AMP 5 Riverview Place	AMP 3 6-9 Admin Building/Main Office	AMP 3 6-9 Holly Hills	AMP 3 6-7 I			Community Buildings/ Offices/ Expansion/ Renovations / Unexpected Needs	Development Number/Name General Description of Major Work Categories	Work Statement for Year: 2 FFY 2013	
Cost																							Quantity	Year: 3	5
\$31,400											\$25,400			\$6,000		1,000	1,000	1,000,1	1,000	2,000	1,000		Estimated Cost		

200 300	Coet	Subtotal of Estimated Cost	505 505	2	Cultivatal of Datimated Cont	The state of the s
			\$1,000		1460	
			000'1		Wall/Floor/Ceiling Repairs	THE REAL PROPERTY.
					AMP 5 Riverview Place	THE REAL PROPERTY.
\$4,000		1460	\$25,702		1460	
4,000		Wall/Floor/Ceiling Repairs	16,702		Replace Vinyl Siding (porches, gables, etc)	THE REAL PROPERTY.
		AMP 5 Riverview Place	5,000		Replace Interior Doors	
\$34,302		1460	4,000		Wall/Floor/Ceiling Repairs	THE CONSTRUCTION
5,000		Install Hard-Wired Smoke Detectors	- Contraction of the Contraction		AMP I 6-11 Tiffany Court	
25,000		Emergency Water/Sewer Line Repairs	\$39,500		1460	
4,302		Wall/Floor/Ceiling Repairs	25,000		Replace Vinyl Siding (porches, gables, etc)	STATE STATE OF
		AMP 1 6-11 Tiffany Court	5,000		Replace Interior Doors	THE REAL PROPERTY.
\$34,000		1460	5,500		Replace Storm Doors	
5,000		Install Hard-Wired Smoke Detectors	4,000		Wall/Floor/Ceiling Repairs	
25,000	1	Emergency Water/Sewer Line Repairs			AMP 3 6-9 Holly Hills	THE REAL PROPERTY.
4,000		Wall/Floor/Ceiling Repairs	\$39,500		1460	THE REAL PROPERTY AND ADDRESS OF THE PERTY ADDRESS OF THE PERTY ADDRESS OF THE PERTY AND ADDRESS OF THE PERTY ADDR
		AMP 3 6-9 Holly Hills	25,000		Replace Vinyl Siding (porches, gables, etc)	THE REAL PROPERTY.
\$9,000		1460	5,000		Replace Interior Doors	
5,000		Install Hard-Wired Smoke Detectors	5,500		Replace Storm Doors	
4,000		Wall/Floor/Ceiling Repairs	4,000		Wall/Floor/Ceiling Repairs	
		AMP 3 6-7 Dogwood Terrace			AMP 3 6-7 Dogwood Terrace	
			\$39,500		1460	THE REAL PROPERTY.
\$36,000		1460	25,000		Replace Vinyl Siding (porches, gables, etc)	The second
7,000		Install Hard-Wired Smoke Detectors	5,000		Replace Interior Doors	THE REAL PROPERTY.
25,000		Emergency Water/Sewer Line Repairs	5,500		Replace Storm Doors	
4,000		Wall/Floor/Ceiling Repairs	4,000		Wall/Floor/Ceiling Repairs	
		AMP 2 6-4 Cloud Apartments	Succession		AMP 2 6-4 Cloud Apartments	
\$84,000		1460	\$39,500		1460	
5,000		Install Hard-Wired Smoke Detectors	25,000		Replace Vinyl Siding (porches, gables, etc)	
25,000		Emergency Water/Sewer Line Repairs	5,000		Replace Interior Doors	The second second
4,000		Wall/Floor/Ceiling Repairs	5,500		Replace Storm Doors	Statement
50,000		Replace Water Meter/Covers/Enclosures/Cutoffs	4,000		Wall/Floor/Ceiling Repairs	Annual
		AMP I 6-I Lee Apartments			AMP 1 6-1 Lee Apartments	See
Estimated Cost	Quantity	Development Number/Nume General Description of Major Work Categories	Estimated Cost	Quantity	Development Number/Nume General Description of Major Work Categories	Year 1 FFY 2011
	Year: 5	Work Statement for Year: 5 FFY 2015		r Year 4	Work Statement for Year 4 FFY 2014	Work Statement for

1,500 1,500 1,500 1,500		5745 000	Subtatal of Estimated Cost	The same of the same of the same of
		18,000	1465	A STATE OF THE PARTY OF THE PAR
	HVAC Equipment	1,500	HVAC Equipment	
	Emergency Mold Remediation	1,500	Emergency Mold Remediation	THE PERSON NAMED IN
1	ADA Modifications	1,500	ADA Modifications	
	Dumpster Repairs	1,500	Dumpster Repairs	The state of the s
12,000	Refrigerators	12,000	Refrigerators	
1450 60,000		60,000	1450	
3,000	Playground Improvements	3,000	Playground Improvements	The second
3,000	Pest Control	3,000	Pest Control	THE REAL PROPERTY.
3,000	Fence Repairs	3,000	Fence Repairs	1年はの前には
3,000	Sidewalks/Parking Lots/Alleys/Streets	3,000	Sidewalks/Parking Lots/Alleys/Streets	
24,000	Landscaping	24,000	Landscaping	The state of
24,000	Neighborhood Appearance	24,000	Neighborhood Appearance	
1430 31,500		31,500	1430	
1,500	Tech Service Long Term Asset Mgmt Plan	1,500	Tech Service Long Term Asset Mgmt Plan	Committee of the last
30,000	PHA Wide A&E Fees	30,000	PHA Wide A&E Fees	THE REAL PROPERTY.
1408 135,500		135,500	1408	211/2000
3,000	Long Term Asset Mgmt Plan	3,000	Long Term Asset Mgmt Plan	100000000000000000000000000000000000000
1,500	HVAC Tech & Equipment	1,500	HVAC Tech & Equipment	THE REAL PROPERTY.
1,500	Resident Business Development	1,500	Resident Business Development	THE PROPERTY.
30,000	Telecomm/Computer Upgrades/Security Cameras	- 30,000	Telecomm/Computer Upgrades/Security Cameras	2.0
1,500	UPCS Inspection Services	1,500	UPCS Inspection Services	The state of the s
5,000	Maint/Mgmt Training	5,000	Maint/Mgmt Training	THE PERSON NAMED IN
2,000	Resident Initiatives Supplies	2,000	Resident Initiatives Supplies	
42,000	Resident Initiatives Manager	42,000	Resident Initiatives Manager	
5,000	Resident Training	5,000	Resident Training	Statement
4,000	Vista Office Supplies	4,000	Vista Office Supplies	Annual
40,000		40,000	Vista Workers	See
ries Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Year I FFY 2011
Year: 3	Work Statement for Year: 3 FFY 2013		Work Work Statement for Year 2 Statement for FFY 2012	Work Statement for